



## **RENTAL APPLICATION**

Building Address: Suite #No. of Bedrooms:			
Security Deposit must come with Application = to ½ months rent (Cert. Check or Money Order) Description:			
How did you hear about us? Please check all that apply			
Drive -by Newspaper: Kijiji Website	: Referral (Name):		
GENERAL INFORMATION			
<u>Applicant</u>			
Full Name:			
Birth Date:			
SIN:			
CONTACT INFORMATION			
Present Address:	Co -Applicant		
Home Phone:			
Cell Phone:	<u> </u>		
Work Phone:	<del></del>		
EMAIL:	<u> </u>		
LIST ALL PERSONS OCCUPYING THE SUITE except APPLICA	<u>INTS</u>		
Name:	Relation:	Age:	
Name:	Relation:	Age:	
PRESENT LANDLORD			
Company Name:	Co -Appl		
Address_	<u> </u>		
Contact Name:	<u> </u>		
Phone:			
Reason for Moving:			
Monthly Rent \$:Time Spent	Time S	Spent	
PREVIOUS LANDLORD ( if less than 5 years)			
Landlord Name:	Co- Appl		
Address	<u> </u>		
Contact Name:	<u> </u>		
Phone:	<u> </u>		
CURRENT EMPLOYMENT			
Company Name:	Co- Appl		
Occupation:			
Address			
Contact Name:			
Phone:			
Years of Employment:			
Income \$:			
Other income:	<del></del>	Continue on Next Page	

CURRENT MONTHLY EXPENSES	
Present rent: \$	Co- Applicant
Utilities: \$	
Phone/cable \$	
Car Payment\$	
Other \$	
TENANCY HISTORY FOR APPLICANTS	
1) Do you owe past rent Yes No 2) Have you been evicted Yes	s No 3) Has there been a claim on your deposit Yes No
CREDIT HISTORY / REFERENCE	
Loans with	Co- Applicant
Phone #	
Current Amount:	
Monthly Payments:	
Credit card Reference	<del></del>
Other Credit Reference	
PARKING INFORMATION	
Will you require Parking ? YES NO	Require second parking space? YES NO
Vehicle Make:Year:	Vehicle Make:Year:
Plate #Colour	Plate #Colour
Driver License #	Driver License #
EMERGENCY/ Next of Kin; Contact Name:	
Relationship:	Address
Phone: (Home):	Work or Cell :
Family Member Name:	Relation:
Address:	Phone :
NO PETS ( including fish ) or visiting pet will not be permitted without written p	permission PET FRIENDI V IINIT - Pet Policy is required
Type of Pet:	Name of Pet :
Size (LBS)	Other Pet Information :
General Condition of T	enancy Agreement
1) It is understood that only those named above will occupy the suite. 2) Digital Cable are parking space, the Tenants may not make claim (financial or otherwise) for its use or lack of including liability insurance. COPY OF INSURANCE IS REQUIRED BEFORE MOVE-IN All landlord 6) This is a DRUG FREE Building. NO illegal or non-medical use of mind or body apply at Tenants Expense.) 7) Applicant must be gainfully employment or have a Co-Sign accurate and complete to the best of applicant's knowledge. Owner reserves the right to di you and or your agent obtaining a factual or investigative information report about me and/or entering into or renewal of a tenancy agreement may be conveyed to a third party. Should applicant agrees to forfeit costs incurred in obtaining the above-mentioned report(s).  Please read General Condition of Telegraphy of the state of	of parking space. 4) Tenants are required to maintain a tenant's insurance package ND on every anniversary date 5) No pets permitted without written permission of altering substances inside or outside of the Property (a 5 day Notice to Quit may a 8) Post Dated Cheques are required upon Move-in 9) All the information is true, squalify tenant if information is not as represented. I hereby consent and agree to / or my guarantor, or to your procuring or causing to be prepared a credit or consumer my guarantor with respect to this application. Information in connection with the any information provided by applicant be falsely represented or canceled, the
Applicant Signature	Date
Co- Applicant	Date

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