LANDLORDBC APPLICATION FOR TENANCY

INSTRUCTIONS

- 1. Landlord must complete all of Section A (Offer to Rent).
- 2. Full legal names of all Applicants are required.
- 3. For credit reporting or other reference purposes, the two pages of this Application for Tenancy can be separated.
- . If the pages are separated, the Landlord should enter the Applicant's name(s) and date of application on the second page.

NOTE TO APPLICANTS:

Do not sign this Application for Tenancy unless:

- You have read agree with all the information provided by the Landlord in Section A.
- All the information you have provided is true and correct.

NOTES TO LANDLORDS:

- **Do** ensure the Applicant(s) sign this Application, giving you consent to do credit and reference checks.
- **Do not** sign this Application for Tenancy unless and until you decide to accept the Applicant(s) as your new tenant(s).

APPLICATION FOR TENANCY

	THE LANDLOE	RD OR LANDLORD'S AUTHORIZED A	GENT (called the "Landlo	rd") MIIST COMPLETE ALL	BI WING IN THIS SE	CTION			
A.			manufacture of the party property of a contract of the			CHON.			
		ndersigned galled the "Applicant" ddress		SC VONO 17		(the residential property.)			
at a	monthly rent of \$_2200	plus parking fees of \$_125	plus other tees of	the second secon	al monthly cost of \$	<u> </u>			
The	above rent includes only the i	utilities checked below. Payment for	all other utilities is the te			_			
Heat Water Supply Hot	Water My Electricity 4 August 1, 2024	Cablevision Gas to Fireplace	Garbage/Recycling Co	ollection Sewage disp	oosal Other	L			
DATE OCCUPANCY DESIRED		0000111	35th Ave Van	couver BC V6	M1J4 604	4 837 0741			
Landlord's Name			Landlord's Address Phone No.						
The Applicant agrees that if this of	fer is accepted, it becomes a t	oinding Agreement and the Applicant	ent and the Applicant will subsequently sign the Landlord's Residential Tenancy Agreement that the Applicant has had an aterbeds and aquariums are not allowed without advance written permission of the Landlord. The Tenancy Agreement						
opportunity to examine. The Applic will also include specific terms related No Smoking of ar	ant acknowledges that pets, I ated to the following: ON COMBUSTIBLE	parbecues, waterbeds and aquaru materials including	ums are not allowed wit vaping. No s	hout advance written perm ubletting. NO	Barbeque	on the patio.			
			700		7.1				
		The state of the s	-impos diferentes		ik detail a line				
If this offer is accepted and the Apr	olicant fails to sign the Landlor	rd's Residential Tenancy Agreement,	or to take possession of the	ne rental unit the Applican	will be liable for the	payment of the equivalent			
of one month's rent to the Landlord	and any related expenses in	curred by the Landlord.	or to take possession or t		So the same for the				
If this offer is accepted, the Applic	ant will pay a Security Depor	sit of \$ to the La	ndlord. If the Landlord pe	ermits the Applicant to have	e a pet, an additiona	al Pet Damage Deposit of			
		Id the Deposit(s) until the tenancy en		ally becoming at	a sergen until				
This offer is subject to acceptance	by the Landlord and is open for	or acceptance until 5:00 pm	Date . If not acco	epted by that time, this offe	er is void.				
B. FIRST APPLICANT'S PRIMAR	OV INCODMATION			Date of Birth	Social Insurance Num	her (ontional)			
D. FINST AFFLICANT S PHIMAN	IT INFORMATION			bate of birth	Coola modiano van	bor (optional)			
Last Name Present Address	First Name	Middle Name	Cit	Month / Day / Year	MAGAZIA	Postal Code (Mandatory)			
Det I o III o	In .	6 Land				0 18 1			
Rent Own How Long?	Heason t	for Leaving	Solant yourself	vii nomailgat.	ends yagir too	Current Rent			
Previous Address	uz ni hasione i adi	yd ashayest arinere	ing chialle du Ci	y and a control of	mal my K	Postal Code (Mandatory)			
Rent Own How Long?	Reason f	for Leaving	al fields and says.	d voje dobaznih	na call dia	Final Rent			
						\$			
CO-APPLICANT'S PRIMARY I	NEORMATION (Complete the f	ollowing only where different from the F	iret Annlicant's information	Date of Birth	Social Insurance Num	ber (optional)			
2. OO ALT LIOANT STRIMATT	Tel Offination (complete the fe	nowing only whole different from the r	not Applicant 5 information	,					
ast Name Present Address	First Name	Middle Name	Cit	Month / Day / Year y	. 14919 125 5	Postal Code (Mandatory)			
Rent Own How Long?	I Poscon f	for Leaving	was worked to be a		are more than	Current Rent			
D D How Long?	neasuri	or Leaving				\$			
Previous Address	rageros at chiesta	nga filosobnick Jan v	mattal 16) no Cit	y Dalgara ean agl	2 Jun 16 -	Postal Code (Mandatory)			
Rent Own How Long?		for Leaving		758 1867 R. CAR		Final Rent			
						\$			
D. APPLICANT'S STATEMENTS									
I/We do not own any pets	I/We own a pet or pets	☐ If owned, describe pet(s)							
I/We are non smokers		/We presently insure our belongings	and for third party liabil	ity Yes 🗆 No 🗆		91 =			
NOTE: The landlord is not res		ions. You are advised to carry tenan			cting you against lia	bility.			
		Application for Tenancy is accep							
		er reporting agencies and from o							
other person, including pers	onnel from any government	t ministry or agency, to disclose re	elevant information abo	ut the Applicant to the L	andlord. If this app	lication is accepted, the			
	the above information will a	also be used and disclosed for res	sponding to emergencie	s, ensuring the orderly r	nanagement of the	tenancy and complying			
with legal requirements.		N 100 100 100 100 100 100 100 100 100 10							
APPLICANT'S SIGNATURES		application unless Section A is comp							
	I/We certify that all inform	nation provided by me/us in this Ap	plication is true and corr	ect.					
Applicant's Signature		Date Signed	Co-Applicant's Signature		Date Signed				
G. LANDLORD'S ACCEPTANCE		orm unless and until you decide to		s your tenant(s).					
	The above Applicant(s) ar	re accepted for tenancy, commencing	1g Date of Oc	ccupancy					
	<u> </u>								

First Applicant:	Applicant: Co-Applicant:								
Date of Application:									
H. FIRST APPLICANT'S SUPPLEMENTARY I			1- "					47.75	
Filone No.	Cell No.	Fax No.				Work Phone No.			
Email Address:	Photo ID Shown Yes			hown Yes	No				
Decemble of (Dulls) As a second secon		The state of the s							
Present Landlord/Building Manager's Name		Address					Phone No.		
Previous Landlord/Building Manager's Name		Address					Phone No.	3200	
Employer		Position			6	Monthly Income			
Supervisor's Name	Supervisor's Phone No.				How long employed				
Tax 1									
Previous Employer		Position				Monthly Income			
Previous Supervisor's Name		Previous Supervisor's Phor	ne No.			How long employed			
						now one omproyed			
Vehicle Make	Model				Colour		Licence Number	J 45	
2nd Vehicle Make	Model			at l	Colour		Licence Number	195	
					ooloui		Licence Number		
Please give two names of next of kin, doctor or o	ther persons for emergenc					9			
wanie		Address					Phone No.		
Name		Address	The state of the s				Phone No.	5	
I. CO-APPLICANT'S SUPPLEMENTARY INFO	ORMATION (Complete th	e following only who	ere different from First	Annlicant's	Information				
Phone No.	Cell No.	o removing only time	Fax No.	Applicants	inormation	Work Phone No.			
Email Address:				Photo ID Sh	iown Yes	No.		1	
				T HOLD ID SI	lowii ics	No			
Present Landlord/Building Manager's Name		Address	TANK A VE	The same to the			Phone No.		
Previous Landlord/Building Manager's Name		Address			*4		Dhone No.		
and the state of t		Address				Phone No.			
Employer	10 Sec.	Position				Monthly Income			
Supervisor's Name		Commission Discovery							
SAPOR FIGURE STREET		Supervisor's Phone No.				How long employed			
Previous Employer		Position				Monthly Income			
Deviaus Cursos leads Hann		Davis Davis I St. II							
Previous Supervisor's Name		Previous Supervisor's Phone	e No.			How long employed			
Vehicle Make	Model			(Colour		Licence Number		
2nd Vehicle Make	Model			0	colour		Licence Number	No.	
Please give two names of next of kin, doctor or of	ther persons for emergence	contact purposes:						-	
Name		Address				Mary	Phone No.		
Name		Address	and the second second				Dhana Na	•	
		Address					Phone No.		
L OTHER ADMIT COOKS TO SEE						20			
J. OTHER ADULT OCCUPANTS – Full names	of all other adult person	is (age 19 or older) to	occupy this rental unit						
ast Name First Name		Middle Name Last Name First Name			Middle Name				
		PISC Name			minute Harito				
ast Name First Name		Middle Name	Last Name	21 11	First Name		Middle Name		
C. OTHER MINOR OCCUPANTS – Full names	of all other persons und	ler age 19 (including	infants) to occupy this re	ntal unit					
act Namo		Ann	The state of the state of						
ast Name First Name		Age	Last Name		First Name		Age		

NOTE TO LANDLORD: If pages one and two are separated, enter the Applicant's name(s) and date of application below

NOTE TO APPLICANT(S)

The information you provided on this page continues as part of your Application for Tenancy. Your signature on the first page confirms all information on both pages is true and correct.