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| **Primary Applicant's Information** | **Applying for Suite number:** |  |
| **Last Name:** | **First Name:** | **Middle Name:** | **Date of Birth:** | **Social Insurance Number:** | **Photo ID Shown: Y N** |  |
| **Email Address:** | **Cell Phone No:** | **Home Phone No:** | **Work Phone No:** | **No. of Adults to occupy this rental unit:** | **No. of children to occupy this rental unit:** |  |
| **Present Address:** | **City:** | **Postal Code:** |  |
| **Present Landlord / Building Manager's Name:** | **Address:** | **Phone No:** |  |
| **Rent Y N**  | **Own Y N** | **How Long ?** | **Reason for Leaving ?** | **Current Rent $** |  |
| **Previous Address:** | **City:** | **Postal Code:** |  |
| **Previous Landlord / Building Manager's Name:** | **Address:** | **Phone No:** |  |
| **Rent Y N**  | **Own Y N** | **How Long ?** | **Reason for Leaving ?** | **Final Rent $** |  |
| **Credit Card Name:** | **Credit Card No: (**To be used for credit report purposes only. DO NOT PROVIDE EXPIRATION DATE**)** | **Type of Credit Card: Visa Mastercard** |  |
| **Employer:** | **Position:** | **Monthly Gross Income:** |  |
| **Supervisor's Name:** | **Supervisor's Phone No:** | **How long employed?** |  |
| **Previous Employer:** | **Position:** | **Monthly Gross Income:** |  |
| **Previous Supervisor's Name:** | **Previous Supervisor's Phone No:** | **How long employed?** |  |
| **Vehicle Make:** | **Model:** | **Color:** | **Licence Number:** |  |
| **Do you own any pet(s)? Y N How Many?** |  **Describe your pet(s):** |  |
| **Do you currently carry tenant insurance and third party liability? Y N** | **NOTE: The landlord is not responsible for tenant's possessions. You are strongly advised to carry tenants' insurance covering your possessions and protecting you against liability.** |  |
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| **CONSENT: For the purpose of determining whether this Application of Tenancy is acceptable, the Applicant consents to the landlord obtaining credit, personal and employment information on the Applicant from one or more consumer repoerting agencies and from other sources of such information. The Applicant authorizes the reporting agencies and any other person, including personnel from any government ministry or agency, to disclose relevant information about the Applicant to the Landlord. If this application is accepted, the Applicant understands that the above information will also be used and disclosed for responding to emergencies, ensuring the orderly management of the tenancy and complying with legal requirements.** |  |
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| I certify that all information provided by me in this Application is true and correct. |  |
| Print Legal First Name | Print Legal Last Name |   | Applicant's Signature |   | Date Signed |  |
|  |  |  |  **Co - Applicants MUST complete other side** |  |  |  |  |  |  |  |  |  |
| **Co - Applicant's Information** | **Applying for Suite number:** |  |
| **Last Name:** | **First Name:** | **Middle Name:** | **Date of Birth:** | **Social Insurance Number:** | **Photo ID Shown: Y N** |  |
| **Email Address:** | **Cell Phone No:** | **Home Phone No:** | **Work Phone No:** | **No. of Adults to occupy this rental unit:** | **No. of children to occupy this rental unit:** |  |
| **Present Address: (complete only if different from Applicant's informations)** | **City:** | **Postal Code:** |  |
| **Present Landlord / Building Manager's Name:** | **Address:** | **Phone No:** |  |
| **Rent Y N**  | **Own Y N** | **How Long ?** | **Reason for Leaving ?** | **Current Rent $** |  |
| **Previous Address: (complete only if different from Applicant's informations)** | **City:** | **Postal Code:** |  |
| **Previous Landlord / Building Manager's Name:** | **Address:** | **Phone No:** |  |
| **Rent Y N**  | **Own Y N** | **How Long ?** | **Reason for Leaving ?** | **Final Rent $** |  |
| **Credit Card Name:** | **Credit Card No: (**To be used for credit report purposes only. DO NOT PROVIDE EXPIRATION DATE**)** | **Type of Credit Card: Visa Mastercard** |  |
| **Employer:** | **Position:** | **Monthly Gross Income:** |  |
| **Supervisor's Name:** | **Supervisor's Phone No:** | **How long employed?** |  |
| **Previous Employer:** | **Position:** | **Monthly Gross Income:** |  |
| **Previous Supervisor's Name:** | **Previous Supervisor's Phone No:** | **How long employed?** |  |
| **Vehicle Make:** | **Model:** | **Color:** | **Licence Number:** |  |
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| I certify that all information provided by me in this Application is true and correct. |  |
| Print Legal First Name | Print Legal Last Name |   | Co - Applicant's Signature |   | Date Signed |  |