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## **APPLICATION FOR TENANCY**

- Full legal names of all applicants are required.
- Do not sign this Application for Tenancy unless you have read and agree with all the information provided by the Landlord in the section below, and all the information you have provided is true and correct.

Suite no: \_\_\_\_\_ Building Address \_\_\_\_\_ (the residential property) at a monthly rent of \$\_\_\_\_\_.

Date Occupancy Desired \_\_\_\_\_

The Applicant herewith makes an Application Deposit of \$\_\_\_\_\_ to the landlord (which will be held as a SECURITY DEPOSIT if a Tenancy commences).

### **APPLICANT'S PRIMARY INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
DOB: M\_\_\_\_/D\_\_\_\_/Y\_\_\_\_ Social Insurance Number: \_\_\_\_\_

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Rent  Own  How Long? \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Monthly Rent: \$\_\_\_\_\_

Present Landlord's Name: \_\_\_\_\_ Address: \_\_\_\_\_

Present Landlord's Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Rent  Own  How Long? \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Monthly Rent: \$\_\_\_\_\_

Previous Landlord's Name: \_\_\_\_\_ Address: \_\_\_\_\_

Previous Landlord's Phone: \_\_\_\_\_

*(NB: Credit card to be used for credit report purposes only. Do not provide expiration date.)*

Credit Card Name: \_\_\_\_\_ Credit Card No. \_\_\_\_\_

### **SUPPLEMENTARY INFORMATION**

Primary Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email Address: \_\_\_\_\_ Photo ID Shown: No  Yes

Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Monthly Income: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Length of Employment: \_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Colour: \_\_\_\_\_ License #: \_\_\_\_\_

**CO-APPLICANT'S PRIMARY INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_  
DOB: M\_\_\_\_/D\_\_\_\_/Y\_\_\_\_ Social Insurance Number: \_\_\_\_\_

Present Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Rent  Own  How Long? \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Monthly Rent: \$ \_\_\_\_\_  
Present Landlord's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Present Landlord's Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_  
City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Rent  Own  How Long? \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Monthly Rent: \$ \_\_\_\_\_  
Previous Landlord's Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Previous Landlord's Phone: \_\_\_\_\_

(NB: Credit card to be used for credit report purposes only. Do not provide expiration date.)  
Credit Card Name: \_\_\_\_\_ Credit Card No. \_\_\_\_\_

**SUPPLEMENTARY INFORMATION**

Primary Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Photo ID Shown: No  Yes   
Employer: \_\_\_\_\_ Position: \_\_\_\_\_ Monthly Income: \_\_\_\_\_  
Supervisor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Length of Employment: \_\_\_\_\_  
Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Colour: \_\_\_\_\_ License #: \_\_\_\_\_

**OTHER PERSONS (including children & infants) TO OCCUPY THE RENTAL UNIT:**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Age: \_\_\_\_\_  
I/We own a pet(s): No  Yes  Describe: \_\_\_\_\_  
I/We are smokers: No  Yes   
I/We presently insure belongings for third party liability: No  Yes

**NOTE: The landlord is not responsible for tenants' possessions. You are advised to carry tenants' insurance covering your possessions and protecting you against liability.**

**CONSENT** for the purpose of determining whether this Application for Tenancy is acceptable, the Applicant consents to the Landlord obtaining credit, personal and employment information on the Applicant from one or more consumer reporting 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 agent, 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.

**APPLICANT'S SIGNATURES**

**NOTE: Do not sign this application unless the above Section is complete and you have read it.**

**I/We certify that all information provided by me/us in this Application is true and correct:**

Applicant's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Co- Applicant's Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_