

## APPLICATION FOR TENANCY

Building:	SUITE #:	RENT\$:	DATE OF POSSESSION:			SSION:	
I/we the undersigned he	rein known as the apr	olicant(s) here	by offer to le	ease the abo	ove named	residential premises in B.C.	
						Tenancy Agreement. This	
offer is subject to accepta	•	•	•				
f this offer is accepted ar	nd the Applicant fails t	o enter or prod	ceed with th	e landlord's	Residentia	I Tenancy Agreement within	
-		•				f the equivalent of up to one	
month's rent to the Landl							
This offer is subject to ac following the date of app					5:00 pm or	n the 5 <sup>th</sup> business day	
Names and ages of all a	dult persons (age 19 d	or older) to occ	cupy the pre	emises:			
Names and ages of all m	ninor persons (under t	he age of 19 -	- including i	nfants) to oc	cupy the pr	remises:	
		n the informati	ion provided	below. We	will not pro	cess an application that is	
not filled out or is missing	g signatures.						
APPLICANT 1						A FOR OFFICE USE ONLY	
FIRST NAME	SURNAME	Middle Nam	ne/Initials	Drivers Lic No		Daytime contact Ph#	
Social Insurance # (optional)		Date of Birth	Date of Birth – MM/DD/YYYY			Home Phone #	
Current Address				Varified Tons	nov2	Noise Complaints?	
			Verified Ter		-	Property in good condition?	
			Legal No Rent Pa			- Toporty in good condition:	
How long	Rent Amount	Reason for	Reason for Leaving			ager Name and Ph #	
Verified	Verified	Verified	ed			Would you rent to them again?	
Previous Address	-	•		Verified Tena	ancy?	Noise Complaints?	
				Legal Notice	?	Property in good condition?	
				Rent Paid on	time?		
How Long	Rent Amount	Reason for	Reason for Leaving		Bldg Manag	er Name and Ph#	
Verified	Verified	Verified	Verified			Deposit returned?	
Current Employer Address:		Position	Position How Phone#			Salary Range	
		<u> </u>				Contact Name	
Employment Verified			1	Income Verif	ied		
Employment scheduled to co		Position Verified					
Previous Employer	Position	Position			Salary Range		
Address:	1	<u> </u>			Contact Name:		

Full Name:Please provide two (2) personal references (For EmFull Name:Full Name:	Relationship: ergency Contact): Relationship:	
Please provide two (2) personal references (For Em Full Name:	Relationship: ergency Contact): Relationship:	
Full Name:	nergency Contact):Relationship:	Ph#:
Please provide two (2) personal references (For Em Full Name:	nergency Contact):Relationship:	
Full Name:	-	
		Ph#:
	Relationship:	Ph#:
<b>INSURANCE:</b> Tenants insurance is required.		
Do you presently insure your belon	igings and carry third party liabi	ility Yes / No
PETS: With prior authorization only – acc	ording to building policy	
WE AGREE THAT WE WILL NOT SMOKE OR VA THE PROPERTY. Cigarette smoking only may b	•	•
Applicant #1	Applicant #2	
E-mail address:		
ACCEPTANCE OF TERMS AND CONDITONS		
This offer is subject to acceptance by the Landlord or Landl day following the date of this application. I/we have read a		
I/We hereby offer to lease the residential premises specific accurate to assist in your consideration of my/our application. Agreement, we will be required to commence a Pre-Authomonth segments for rental payments.	ion for tenancy. I/We understand and	agree that once we enter into a Tenancy
CONSENT:		
The Applicant(s) represents that all statements give references given. I / We hereby consent to the Landone or more consumer reporting agencies or from o and other persons to disclose information on me/us Applicant(s) understand that the above information ensuring the orderly management of the tenancy and	dlord and/or their agents obtain ther sources of information. I / to the Landlord or their agent. will also be used and disclosed	which is a comparison of the control
DATED AT:	DATE:	
Signature - Applicant #1	Signature - Applicant	: #2
OFFICE USE ONLY		
Tenant advised of Status	Date	Ву
Application Reviewed By:	Accepted:	Rejected

FIRST NAME SURNAME		Middle Name/Initials	Drivers Lic	: No	EA FOR OFFICE USE ONL  Daytime contact Ph#		
					.,		
Social Insurance #(optional)		Date of Birth – MM/DD/	YYYY		Home Phone #		
Current Address			Verified Te	enancy?	Noise Complaints?		
			Legal Notice?		Property in good condition?		
			Rent Paid				
How long	Rent Amount	Reason for Leaving	Bldg Manaç		nager Name and Ph#		
Verified	Verified	Verified		Would you rent to them again			
Previous Address		Verified Tenancy?		enancy?	Noise Complaints?		
		Legal N			Property in good condition?		
		Rent Paid on time		on time?			
How Long	Rent Amount	Reason for Leaving		Bldg Mar	nager Name and Ph#		
Verified	Verified	Verified			Deposit returned?		
Current Employer		Position	How Long		Salary Range		
Address:		Phone#			Contact Name		
Employment Verified			Income Verified				
Employment scheduled to continue?				Position Verified			
Previous Employer		Position	How Long		Salary Range		
Address:		Phone:			Contact Name:		
REFERENCES					I		
	2) unbiased references:	_					

Full Name: \_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_ Ph#: \_\_\_\_\_\_

Full Name: \_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_ Ph#: \_\_\_\_\_\_

Please provide two (2) personal references (For Emergency Contact)