

RESIDENTIAL RENTAL APPLICATION

| FOR OFFICE USE | ONLY: | | | |
|------------------------------|----------------------------------|-------|--|-----------------------|
| | Building: | | Pos | session Date: |
| | ,20 | | | |
| | One application for | each | adult Tenant is required. | |
| Property Applying fo | r: | | | |
| Applicant: Name: | | | | |
| Home Phone #: | | | Cell Phone #: | |
| Work Phone #: | Ema | il: | | |
| Date of Birth: | | | S.I. N | |
| | | | | |
| | | | | |
| City: | Prov.: | | Postal Code: | |
| | | | Pd by: | |
| | | | | |
| | | | | |
| Landlord/Agency Con | tact Phone #: | | | |
| • | | | eaving Present Address: | |
| | | | | |
| | | | | |
| Other Occupants: | | | | |
| Name: | Age | : | Relationship: | |
| Name: | Age | : | Relationship: | |
| Name: | Age | : | Relationship: | |
| | | | Relationship: | |
| | | | | |
| | | - | itted occupancy. Termination of ter | • |
| result if unauthorized perso | ons take up occupancy. Maximum i | ıumbe | er of adult occupants at any time is r | estricted to two (2). |
| Provious Address | | | | |
| City: | Drov. | | Postal Code: | |
| | | | 1 Ostai Code. | |
| • | · · | | | |
| • | • | | | |
| • | • | | ns for Leaving Previous Addre | |
| TIOW LONG ALFIEVIOUS | Addless P | Casu | ns for Leaving Fievious Addit | /ss |

| Present Employer: | | |
|---------------------------------------|--|--|
| Address of Employer: | | |
| | | |
| | | <u>;</u> |
| Employer Contact Phone #: | | |
| Other Courses of Income/I | lanatan. | Coop #4 |
| | | Case #: |
| | | |
| | | |
| | | |
| Dranch Address: | | |
| Description of Vehicles u | ised by Occupants. | |
| | | License #: |
| | | License #: |
| Number of Parking Stalls Re | | |
| | | perty and will be towed at owner's expense. |
| In case of emergency cor | ntact: | |
| . | | Phone #: |
| | | |
| | | Postal Code: |
| | | 1 osur code. |
| C 4 N | 1 | DI // |
| | | Phone#: |
| | | Powel Code |
| | | Postal Code: |
| | | N 1 |
| | | rance Number |
| | | |
| | | |
| | | |
| | | |
| | | |
| Branch Address: | | |
| Guarantor will be required to com | nplete a credit check information form | i and consent form. |
| I hereby certify the above i | information to be correct, and | l consent to the undertaking of a personal credit. |
| • | - | eck. All personal information will be treated i |
| 0 , | 2 0 | The Personal Information Protection & Electronic |
| Documents Act (PIPEDA). | • | Zaran |
| · · · · · · · · · · · · · · · · · · · | | shall sign a tenancy Agreement. |
| Applicant Signature | | Date |
| •• | | Date: |
| Guarantor Signature: | | Date: |

| I hereby deposit the sum of | | | | | | | |
|---|---------------------------------|----------|--------------------------------------|-----------------------------|--|--|--|
| If my application is not accepted, this deposit shall be refunded forthwith. If my application is accepted, and I decide not to take up residence, Prairie Rental Properties will retain my deposit to cover the costs incurred | | | | | | | |
| while processing this application. | | | | | | | |
| Applicant Initial: | | | | | | | |
| 11 | | | | | | | |
| FOR OFFICE VICE ON V | | | | | | | |
| Rent: Security: | Pd date: | | Pd Method: | | | | |
| Processing date on cheque, sh | | | | | | | |
| • | - | | | | | | |
| Lease from (date): | | | | | | | |
| Parking: Number of stalls Parking: Number of stalls | | | | | | | |
| | | | | | | | |
| Total Month Payable: Landlord Authorization: | | App | roval Date: | | | | |
| Tenants notified by: | | Date | : | | | | |
| Tenant Responsible for: | HYDRO YES/NO | J | WATER YES/NO | GAS YE | S/NO | | |
| Separate Meter (S/M) | S/M YES/NO |) | S/M YES/NO | S/M YE | S/NO | | |
| | Snow Removal Cable TV YES/NO | | Pho | Grass Cutting one YES/NO | g YES/NO | | |
| COMMENTS: | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Application Received By: | | | _Date: | | | | |
| <u>L</u> | | | PLOYER REFI by Landlord <u>Ol</u> | | | | |
| regarding the applicant and the rePIPEDA. | | | | | appreciate your feedback reated in accordance with | | |
| Landlord Reference: To be | Completed by La | andlord. | | | | | |
| How long was the length of to | enancy? | | | | _ | | |
| Is there an existing lease agreement and when does it end? | | | | | | | |
| Amount of rent: | Paid in full: | Y | N | | | | |
| Was rent late? always | occasionally | | never | | | | |
| History of NSF cheques: Y N How often? | | | | | | | |
| Are there outstanding monies For what reason? | owing? Y | N | How much?: | | _ | | |
| Have there been disturbance warnings? | | | | | | | |
| Has the tenant been served wi | th termination not | tice? | Y N | | | | |
| If yes, what was notice for? _ | | | | | | | |

| Have police ever attended the unit? |
|--|
| Did the tenant provide proper notice of vacating? Y N |
| What was the condition of the unit? |
| Would you rent to this tenant again? Y N |
| Employer/Source of Income Reference: To be Completed by Employer/Source of Income |
| Verify start and end date of employment: |
| Verify current salary/wage: |
| Verify reliability: |
| Other pertinent information: |
| I, authorize my current/past Landlord and Employer to provide personal. (print name) information to Prairie Rental Properties. |
| Date Signature of Applicant |
| NAME: |
| ADDRESS: |
| CITY: |
| POSTAL CODE: |
| PHONE NUMBER: |
| DATE OF BIRTH: |
| S.I.N.: |
| I, hereby authorize Prairie Rental Properties (known as the property management company) to undertake with my consent the following: |
| A current and previous landlord reference check A present employer/source of income check Consent to the undertaking of a personal credit investigate. |
| All personal information will be treated in accordance with the Privacy Legislation Bill (Bill C6 – The Personal Information Protection & Electronics Documents Act (PIPEDA) |
| Applicant signature Date |