

APPLICATION FOR TENANCY

Property Information			
Suite #:	Address:	Rent \$:	Date Req:
Applicant Information			
Name:			
Date of birth:	DL #:	Phone:	
Current address:			
City:	Province:	Postal Code:	
Email:			
Own	Rent	Monthly payment or rent:	How long?
Reason for move:			
Landlord name:		Landlord Phone #:	
Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	Province:	Postal Code:	
Position:	Hourly	Salary	Annual income:
Co Applicant Information			
Name:			
Date of birth:	DL #:	Phone:	
Current address:			
City:	Province:	Postal Code:	
Email:			
Owned	Rented	Monthly rent \$:	How long?
Reason for move:			
Landlord name:		Landlord Phone #:	
Co Applicant Employment Information			
Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	Province:	Postal Code:	
Position:	Hourly	Salary	Annual income:
Pets			
I/We do not own any pet		I/We do own a pet or pets	
Smoking			
I/We are non-smokers		I/We are smokers	
References			
Name:	Address:		Phone:
I 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 Application for 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 agency, to disclose relevant information about the Applicant to the Landlord.			
Signature of Applicant:			Date:
Signature of Co-Applicant:			Date: