

RENTAL APPLICATION

Suite: _____ Building: _____ Occupancy Date: _____

APPLICANTS PERSONAL INFORMATION

First Name: _____ Last Name: _____

Cell Phone: (_____) _____ Work Phone: (_____) _____

Email Address: _____ Date of Birth: _____

Social Insurance Number: _____ Smoker: YES/NO (Tobacco Smoking only outside)

Second Applicant (Co-Applicant OR Co-Signor) Please circle one

First Name: _____ Last Name: _____

Cell Phone: (_____) _____ Work Phone: (_____) _____

Email Address: _____ Date of Birth: _____

Social Insurance Number: _____ Smoker: YES/NO (Tobacco Smoking only outside)

| | |
|--------------------------|-------------------|
| Name(s) of Dependent(s): | Date(s) of Birth: |
| _____ | _____ |
| _____ | _____ |

Current Address: _____ City: _____

Prov: _____ Postal Code: _____ How long at this address? _____

Landlord / Lessor: _____ Phone: (_____) _____

DETAILS OF EMPLOYMENT

Employer: _____

Occupation: _____ How Long: _____

Supervisor's Name: _____ Phone: (_____) _____

Salary: _____

Other Income Source: _____ Amount: _____

VEHICLE INFORMATION

Make / Model: _____ Year: _____

License Plate Number: _____

EMERGENCY CONTACT

Name: _____

Relationship: _____ Phone: (_____) _____

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The applicant agrees to enter into an Occupancy Agreement when requested by the Landlord on the Landlord's forms and abide by the conditions of such agreement. I/We have inspected the said premises and accept the same to be in good condition. In good faith, I/We deposit the sum of \$_____ as an application fee & / or security deposit, which upon application approval shall be credited by the Company to a security Deposit. The said Application / Security Deposit Fee is forfeited as liquidated damages if I/ We fail to take possession of the premises as agreed. Any damage found in taking possession must be reported in writing to the company within 7 days. I/We hereby agree that personal investigations may be conducted, and consumer reports obtained in support of this application

PAYMENT INFORMATION

A pro-rated rent of \$_____ will be paid in advance to cover the period from _____, to _____, 20_____.

NOTE: The term of occupancy is to begin and end on a Calendar month basis. ALL REGULAR PAYMENTS ARE PAYABLE IN ADVANCE BY THE FIRST OF EACH MONTH.

PROPOSED LEASE TERM: Beginning _____, 20_____ and Ending _____, 20_____.

DUE FOR PAYMENT: Pro-Rated Rent \$_____ Base Rent \$_____ Security Deposit \$_____

No. of Pets _____ Non-refundable Pet Fee(s) _____

Move in Bonus \$ _____ Move in Bonus \$ _____

Dated this _____ day of _____, 20_____.

I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Tenant _____

Signature Properties Inc.

Tenant _____

Per: _____

(Resident Manager)

(APPLICATION MUST BE SIGNED BY ALL APPLICANTS BEFORE PROCESSING)