

RENTAL APPLICATION

1. RENTAL PREMISES APPLIED FOR:

(Witness)

Apt #: Building Address:, City:

737 Belmont Ave. W. Kitchener, ON N2M 1P3 Canada T: 519-743-5073 F: 519-743-6490 E: jmp@citycorp.ca

Name(s)	Present A	Present Address			Telephone	
. DETAILS OF OCCUPANCY: Name			Gende	<u> </u>	Age (d/m/y	
				e Female	g. ()	
			☐ Mal	e Female		
			☐ Mal	e Female		
			☐ Mal	e Female		
Gas NO SUMMARY OF MONIES TO BE PAID (BY Total Monthly Rental for first n Deposit towards last month's re	nonth's rent	\$ \$				
TOTAL		\$				
We, hereby certify the information provided about Application by the Landlord, I/We shall forthwith our which, I/We, have been given the opportunic occupancy. IF I/WE SHOULD FAIL TO ENTER DAMAGES ACCRUING TO THE LANDLORD of the Landlord is unable to give possession of the total be subject to any liability to the Applicants are sossession of rented premises is offered by the Landlord in the event that a Tenancy Agreement agreement. In the event that a Tenancy Agreement will be desired to a subject to the subject the validity of the Tenancy Agreement.	ove and on the theorem into ity to review R INTO SUO, I/WE, AGH erented prenand shall give and lord to To, the obligation is entered ement. Any of the content is entered ement.	he reverse of this a Tenancy Agre y, in which event CH TENANCY A REE AND ACKN mises on the date we possession as cenants. Failure to ions of the Tenan into, this Rental a omission or missi	form to be true. I/V ement incorporating the deposit shall be AGREEMENT, IN IOWLEDGE THAT of commencement of soon as the Landlor give possession on the or in any way be Application by the tatement by the Application to the commencement of the com	g the above ter applied toward ADDITION TO THE DEPOS of the term for a rd is able to do to the date of co construed to ex erms of clause?	ms into the Lads the rent of the O ANY OTHE IT SHALL BE any reason, the o so. the rent shammencement steend the term of 24 of the Tenar Rental Applicat	
will be deemed to form part of the Tenancy Agre in the termination of your tenancy by the Landlor Landlord or his Agent to perform crear reasonable steps to assess this Rental Appl	lit checks,					

(Applicant 2)

CITYCORP Management undertakes to treat the collection, use and disclosure of information in compliance with the Privacy Act.

APPLICANT'S PARTICULARS

	APPLICANT (1)	APPLICANT (2)
Date of Birth (dd/mm/yyyy)		
Social Insurance Number (optional)		
Email Address		
How long have you lived at your present address?		
Landlord's name and telephone		
How long have you lived at your previous address?		
Previous Landlord's name and telephone number		
Occupation		
Length of employment		
Employer's name and telephone		
Annual income		
Make, year, and colour of car		
License number		
Driver's license number		
Pets: ☐ No ☐ Yes How many?		
What kind of pet?		
IN CASE OF EMERGENCY,	Contact Person or Next of Kin:	
Name:		
Address:		
Phone:		
Relationship:		
I/We hereby certify that the above	ve information is complete and correct.	
(Witness)		(Applicant 1)
(Witness)		(Applicant 2)