

RENTAL APPLICATION FORM

Landlord's names: Tracy and Charmaine Grills
 Business phone: 403-208-5021
 Cell phones: 403-447-7449 (Tracy) 403-880-2633 (Charmaine)
 Fax number: 403-208-5021

Address applied for: _____
 Date possession is requested: _____

IMPORTANT: THE LAST PAGE OF THIS APPLICATION FORM MUST BE SIGNED OR WE CANNOT PROCESS YOUR APPLICATION. Failure to fill this form out correctly and completely may result in your application being denied

Applicant's full legal name	
Date of birth	
Social insurance number	
Driver's license number and expiry date	
Home phone number	
Work phone number	
Cell phone number	
Email Address	

Current address	
City and province	
Postal code * REQUIRED *	
Do you rent or own the place you are currently living in?	
If renting, current landlord's name	
Landlord's phone number	
Amount of current rent or mortgage payment	
Did you pay your rent by direct debit, post-dated cheques, or cash?	
Date you moved to your current address	
Date your current lease expires	
Your reason for moving	
Have you given your current landlord 30 days notice yet?	

Previous address	
City and province	
Postal code * REQUIRED *	
Did you rent or own this property?	
If you rented, your landlord's name	
Landlord's phone number	
Amount of rent or mortgage payment	
Did you pay your rent by direct debit, post-dated cheques, or cash?	
Date you moved to this address	
Your reason for moving	

Previous address	
City and province	
Postal code * REQUIRED *	
Did you rent or own this property?	
If you rented, your landlord's name	
Landlord's phone number	
Amount of rent or mortgage payment	
Did you pay your rent by direct debit, post-dated cheques, or cash?	
Date you moved to this address	
Your reason for leaving	

Names of all other adults who would be occupying this property with you	
Names and ages of any dependent children who would be occupying this property with you	
Name, breed and age of pet(s) to occupy property	

Name of your current employer	
Your job title	
Address of employer	
Name and title of your supervisor	
Supervisor's phone number	
Date you started employment there	
Your monthly gross income	

Name of your prior employer	
Your job title while employed there	
Address of employer	
Name and title of your supervisor	
Supervisor's phone number	
Date you started employment there	
Date you left employment there	
Your monthly gross income	

Name of your prior employer	
Your job title while employed there	
Address of employer	
Name and title of your supervisor	
Supervisor's phone number	
Date you started employment there	
Date you left employment there	
Your monthly gross income	

Other <u>regular</u> sources of income (such as child support, family allowance, or other income)	
Amount per month	

Have you ever filed a petition for bankruptcy?	
If yes, how long ago?	
Have you ever been evicted or asked by a landlord or his agent to leave any rented premises?	
If yes, explain when and why?	
Have you ever not paid rent when due?	
If so, why?	
Are you required to pay child support or alimony?	
If so, how much per month?	

CREDIT REFERENCE (list bank account from which rent will be paid)

Note: The landlord will phone your credit institution to verify that the account you will pay your rent from is in good standing and contains sufficient funds to cover the monthly rent. The total amount of money in the account will not be disclosed to the landlord.

Name of credit institution	
Account number	
Type of account	
Address of institution	
Is this account in good standing?	

PERSONAL REFERENCES – DO NOT LIST RELATIVES

Name of reference	
Reference's occupation	
Reference's phone number	
How do you know this person?	
How long have you known this person?	

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How long have you known this person?	

RELATIVES OR FRIENDS WHO CAN BE CONTACTED IN CASE OF EMERGENCY

Name	
Phone number	
Relationship to you	

TERMS TO BE INCLUDED IN THE LEASE AGREEMENT

1. Tenants are only those adults and children designated in this application.
2. The rent shall be _____ dollars (\$_____) per month, due and payable on the first day of each month.
3. _____ parking stalls are included with the premises.
4. No pets unless written permission given by the Landlord.
5. Absolutely no smoking in the residence.
5. List all cars, license numbers, make, year and colour that will be parked in your assigned parking stalls.
6. The tenant must insure his or her own property against damage or loss.

DECLARATION

I _____ hereby agree to lease from Tracy and Charmaine Grills, known as the Landlord, the above premises. As an indication of my good faith in making this offer, I hereby hand to the Landlord the sum of _____ Fifty Dollars _____ dollars (\$50.00) in the form of certified cheque, cash or money order, as a deposit on the premises on the understanding that if my offer is accepted, the deposit shall be retained by the Landlord as a 'Deposit' in accordance with the provisions of the Lease Agreement, and if my offer is not accepted, the full deposit will be refunded to me provided, however, that if my offer is accepted and I cancel the application or fail to execute the Lease Agreement, when prepared and presented, then I agree that the said deposit shall be absolutely forfeited to the Landlord. This shall be considered liquidated damages and not a penalty. Acceptance of this offer will be deemed to have been made by the Landlord's execution of the acceptance section.

I declare that the information contained in this form is true and correct. I authorize the verification of this information and the obtaining of a consumer credit report. I specifically authorize Tracy and Charmaine Grills to contact employers, landlords, credit and personal references, banks, and police for the sole purpose of verifying the information given above. All information obtained will be held and used in a confidential manner.

I also understand that the Landlord may terminate any agreement entered into if there are any misstatements or misrepresentations made above. In the event of termination under such conditions, the Landlord will deduct all reasonable expenses associated with lease termination from any deposits held in trust.

I also agree that if this application is accepted I will obtain tenant's insurance for the above property prior to my occupancy.

Applicant's signature: _____

Application date: _____

ACCEPTANCE

Accepted and agreed this _____ day of _____, 20____.

Tracy Grills

Charmaine Grills