

OSGOODE PROPERTIES LTD. ("The Landlord")

Consent Under the *Personal Information Protection and Electronic Documents Act ("PIPEDA")*

Your Information

Mr. Mrs. Ms. Miss

Surname: _____ First Name: _____ Initials: _____
(the "Applicant")

Consent

1. The Applicant consents to the disclosure of his or her personal information related to rental payments, rule violations, defaults under his or her lease, and complaint history (the "**Tenancy Information**") while living in leased premises owned or operated by any of the Applicant's current or former landlords ("**Referees**"). Consent to disclose the Tenancy Information to the Landlord is for the purpose of the Landlord assessing the Applicant's suitability to be a tenant in a building owned or operated by the Landlord (the "**Tenancy Suitability Assessment**").
2. The Applicant consents to the disclosure of his or her personal information by any of his or her current employers ("**Employer**") concerning:
 - (a) verification that the Applicant is employed by the Employer;
 - (b) the length of time the Applicant has been employed by the Employer; and
 - (c) the Applicant's salary from the Employer;(the "**Employment Information**") for the purpose of the Tenancy Suitability Assessment.
3. The Applicant consents to the use and disclosure of this form by the Landlord to Referees and Employers in order to provide proof to them that the Applicant's Tenancy Information or Employment Information, as applicable, may be disclosed by them, to the Landlord.
4. The Applicant consents to the Landlord collecting his or her Tenancy Information from any Referee; and Employment Information from any Employer; for the purpose of the Tenancy Suitability Assessment.

Witness

Applicant's Signature

Date: M / D / Y

Osgoode Properties Ltd.
1284 Wellington Street
Ottawa, Ontario K1Y 3A9
Phone: (613) 729-0656 Facsimile: (613) 729-7991

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Employer Information (please provide information for 2 previous employers)

Name: _____ Contact Person: _____

Address: _____

Phone Number: _____ Facsimile Number: _____

Name: _____ Contact Person: _____

Address: _____

Phone Number: _____ Facsimile Number: _____

Former Landlord Information (please provide information for 2 previous landlords)

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

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