



Rental Application

("PLEASE PRINT")

*****A SEPARATE APPLICATION IS REQUIRED FOR EACH ADULT THAT WILL OCCUPY UNIT*****

Last Name _____ First Name _____ Middle Initial _____

Mr. Mrs. Miss Ms. S.I.N.# _____ Birthdate (yyyy/mm/dd) _____

Home Phone () _____ Business Phone () _____

Present Address _____ APT # _____ City _____ Prov _____

Postal Code _____ How Many Years At? _____ Rent Own Monthly Payment \$ _____

Landlord/Mortgage Co. _____ Phone () _____

Name of Spouse: Last Name: _____ First Name: _____ Birthdate (yyyy/mm/dd) _____

Previous Address _____ APT # _____ City _____ Prov _____

Postal Code _____ How Many Years At _____ Rent Own Monthly Payment \$ _____

Landlord/Mortgage Co. _____ Phone () _____

Present Employer _____ City _____ Years At _____

Supervisor's Name: _____ Supervisor's Telephone Number: _____

Occupation _____ Annual Salary \$ _____

Previous Employer _____ City _____ Years At _____

Previous Supervisor's Name: _____ Supervisor's Telephone Number: _____

Occupation _____ Annual Salary \$ _____

Other Income \$ _____ Sources _____

Bank(s) _____ Credit Card(s) _____

Vehicle Information: Make _____ Year _____ License Plate _____ Drivers License # _____

Vehicle Information: Make _____ Year _____ License Plate _____ Drivers License # _____

Names of Children that will reside in Unit:

Name _____ Birthdate _____ Name _____ Birthdate _____

Name _____ Birthdate _____ Name _____ Birthdate _____

Emergency Contact Name _____ Address _____

Home Phone () _____ Business Phone () _____

PETS: Breed _____ Name(s) _____ Tag # _____

INSURANCE: Name _____ Address _____

- The Lessee is required to obtain and maintain insurance for personal and property liability.
- Keys for a rental unit will not be released to the Applicant until proof of insurance is provided to the Landlord.

Rental Application for Unit # _____ located at _____

It is understood by the Applicant(s) that the sum of \$ _____ given by the Applicant(s) to the Landlord is to be held as a Last Month's Rent Deposit, refundable if the Landlord does not accept this Rental Application. In the event I/we fail to execute a tenancy agreement for the Rented Premises, or notify Osgoode Properties in writing our intention not to take occupancy or provide an invalid cheque, the premises will be placed on the available to rent list and a cancellation charge equal to the last month's rent shall be payable to the Landlord. **I, hereby authorize you to obtain information about me from outside parties, including through a tenant or credit check conducted by "Rent Check Credit Bureau, and verify information with them. I authorize those parties to give you the information about me. You may disclose information about me to a credit bureau, and to persons with whom I have or propose to have financial or residential rental dealing, or if you believe disclosure is required by law, to help establish my credit/rent payment history and to support the credit approval process. I verify that all statements on this application are true and I authorize verification of all references given.** In connection with my application for tenancy, I/we hereby consent that Osgoode Properties Limited conduct and/or cause to be conducted a credit investigation including confirmation of employment, income and previous tenancies.

Dated this _____ day of _____

Yes, I have read and agree to the Collection and Use of Credit and Rent Payment information as stated above.

Witness

Applicant

Witness

Applicant

We hereby accept the above application.

OSGOODE PROPERTIES

Date: _____

Per: _____

FOR OFFICE USE ONLY				
<input checked="" type="checkbox"/> New	<input type="checkbox"/> Trf	<input type="checkbox"/> Rnw	<input type="checkbox"/> Sub	
Unit ID _____	Occupancy Date _____	To _____		
Rent \$ _____	Parking \$ _____	Total \$ _____		
Pro Rate:	Date From _____	To _____		
Amount: Rent \$ _____	Parking \$ _____	Total \$ _____		