



# Rental Application

CONFIDENTIAL INFORMATION SHEET please note that if all sections are not filled out, approval may be delayed

Name	Last:	Last:
	First:	First:
Current Address		
City/Province		
Postal Code		
S.I.N		
Date of Birth	Year:      Month:      Date:	Year:      Month:      Date:
Current Phone No.	(      )      -	(      )      -
Current Landlord		
Landlord Phone No.	(      )      -	(      )      -
Previous Address		
City/Province/Postal Code		
Previous Landlord		
Landlord Phone No.	(      )      -	(      )      -
Company or Employer		
Occupation		
Phone Number	(      )      -	(      )      -
Monthly Income		
How Long?		
Vehicle Type & Model		
Drivers License No.		
License Plate No.		
Personal Reference		
Relationship		
Phone No.	(      )      -	(      )      -
Emergency contact		
Relationship		
Phone No.	(      )      -	(      )      -

Project: \_\_\_\_\_ Suite: \_\_\_\_\_ Move In Date: m \_\_\_\_ d \_\_\_\_ y \_\_\_\_ Rent: \$ \_\_\_\_\_ Parking: \$ \_\_\_\_\_ TOTAL: \$ \_\_\_\_\_

I/We, \_\_\_\_\_ hereby apply to lease suite # \_\_\_\_\_ for \_\_\_\_\_ (months), from the first day of \_\_\_\_\_ to the last day of \_\_\_\_\_

I/We hereby certify that all statements made in this application are true and I/we hereby authorize the Landlord to conduct a personal investigation/credit check and to contact any person identified in this Rental Application. **I/We hereby acknowledge that there are no pets allowed on these premises with out the landlord's approval.**

The Landlord hereby acknowledges receipt of the sum of \$ \_\_\_\_\_ as deposit to be considered as a rental deposit, **forfeitable, in the event that the applicant does not take occupancy on the commencement date as agreed** upon or fails to execute the standard lease agreement when presented for execution. Upon the applicant taking possession of the apartment, the deposit shall be deemed to be a Security Deposit as defined in the Province of Alberta under the Residential Tenancies Act, consolidated August, 1992.

How did you find us? Newspaper / Home Renter's Guide / Referral / Walk or Drive By / Other \_\_\_\_\_

Dated this \_\_\_\_ day of \_\_\_\_\_, Year \_\_\_\_\_

Witness: \_\_\_\_\_

Applicant #1: \_\_\_\_\_

Phone Number : \_\_\_\_\_

Applicant #2: \_\_\_\_\_

Phone Number: \_\_\_\_\_