RENTAL APPLICATION dated This Rental Application is © London Property Management Association, 2007. Version: 01-2007.



| TO: | | | | (Address) | |
|-----------------------------------|---|---|---|---|---|
| | (Street No.) (Street) | (City) | (Province) (Postal C | ode) | |
| 1. | APPLICANT(S) | PRESENT | ADDRESS | | |
| (1) | Name | Apt. No. | Street | City | Postal Code |
| (2) | | · | | • | . cottai cotto |
| | Name | Apt. No. | Street | City | Postal Code |
| | TELEPHONES: Home | | Business | | |
| 0 | Mobile | EMAIL: | | @ | |
| 2. | RENTAL PREMISES APPLIED FOR: Suite No. Address: | | City | | UNIT TYPE |
| | Parking privileges required for private at | utomobile(s). Outside | | | |
| | (specify number of spaces in each category) NOTE: NO DOGS, CATS, OR OTHER PETS OR ANIMALS ALLOWED | | | | |
| | NOTE. NO DOGS, CATS, OR OTHER PETS | OR ANIMALS ALL | Applicant's Signature | e(s) re: NO PETS | |
| 3. | PROPOSED OCCUPANT(S): NAMES | DATE OF BIRTH (D/M/Y) | NAMES | | DATE OF BIRTH (D/M/Y) |
| | | | | | |
| Terr | n to commence | | Term to end | | |
| Date | accomodation required | | RF | ENTAL INCENTIVE | |
| 4. | (i) RENTAL INFORMATION: [Includes discount | t specified in 4(ii)] | If the Rented Premises are s | | nt, the amount of the |
| | Monthly Rental | \$ | discount shall be \$ | which shall be g | iven as follows: |
| | Parking Air Conditioner | \$ \$ | | | |
| | Appliances | \$ | | | |
| | Additional services (specify) | \$ | A Pro-Rated Rent of \$ | | |
| | Additional services (specify) | \$ | period from | to | Date |
| | TOTAL MONTHLY RENTAL The Applicants agree to pay for the following continuous | \$ | blo to the Ponted | | Specify Yes or No |
| | The Applicants agree to pay for the following service Premises and to provide written confirmation from | | o commoncoment | ectricity | Specify 163 of 140 |
| | of lease that utilities are in Applicants name(s): | / December 10 10 | Wa | ater | |
| 4. | (ii) The charges listed in 4(i) above include a 2% given monthly <u>only</u> if Total Monthly Rental is paid o | n or before the first day | of each month. | | |
| | This discount may be discontinued, in the Landlord expiry of the initial term of this Agreement. | l's sole discretion, at any | | at Iter Heater Rental | |
| 4. | (iii) SUMMARY OF MONIES TO BE PAID | | Ca | ble TV | |
| | Total Monthly Rental for first month's rent | \$ | Otl | ner:Specify | |
| | Pro-Rated Rent | \$ | | , | |
| | Contract Deposit Refundable deposit for entry key/card | \$ \$ | Contract Deposit recei | ved with this Renta | l |
| | TOTAL | \$ | Application | | \$ |
| Appli been occu | hereby certify the information provided above and on the rication by the Landlord, I/We shall forthwith enter into a given the opportunity to review, in which event the Conpancy. IF I/WE SHOULD FAIL TO ENTER INTO SUCTHE LANDLORD, I/WE AGREE AND ACKNOWLEDGE | Tenancy Agreement inco tract Deposit shall be dee H TENANCY AGREEMI | orporating the above terms into the med to be a Rent Deposit and a ENT, IN ADDITION TO ANY OT | he Landlord's usual for applied towards the re THER RIGHT TO DAI | orm which I/We have nt of the last month's |
| to the the T any v 27 of | Landlord is unable to give possession of the rented premise Applicants and shall give possession as soon as the Land enant. Failure to give possession on the date of commenc vay be construed to extend the term of this Tenancy Agreement will be deemed to form part of the termination of your tenancy by the Landlord even after occur | lord is able to do so. The rement shall not in any way nent. In the event that a To Tenancy Agreement. Any | rent shall abate until possession of affect the validity of the Tenancy A enancy Agreement is entered into, | rented premises is offe Agreement, the obligation this Rental Application | red by the Landlord to ons of the Tenant or in by the terms of clause |
| | Applicant hereby gives permission to the | | | | |
| info to r | sumer report; to contact employers, promation; to enforce the terms of any Tenar easonably use it otherwise to assess this red to give reasons therefore. | ncy Agreement that | may be subsequently er | ntered into with t | he Applicant; or |
| | (Witness) | | (Applican | t 1) | |
| | (Witness) | | (Applican | i 2) | |
| ACC | EPTANCE; The Landlord hereby accepts this Rental Ap | plication/Offer to Lease fo | or the Rented Premises as hereir | described. | |
| | (Date) | | (Landlord | or Agent) | |

APPLICANT'S PARTICULARS

APPLICANT 1

| A DDI IO A NIT | |
|----------------|---|
| APPI ICANT | 1 |

| Present Landlord's Name | | | | | | |
|--|---|---|--|--|--|--|
| Present Landlord's Address | | | | | | |
| | | | | | | |
| Present Landlord's Phone Number | | | | | | |
| Years lived at present address?: | | | | | | |
| What is your previous address? | | | | | | |
| | | | | | | |
| Years lived at previous address? | | | | | | |
| Name of Previous Landlord | | | | | | |
| Address of Previous Landlord | | | | | | |
| | | | | | | |
| Phone # of Previous Landlord | | | | | | |
| Employer's Name | | | | | | |
| Address | | | | | | |
| Telephone | | | | | | |
| Length of Employment | | | | | | |
| Occupation | | | | | | |
| Annual Income | | | | | | |
| | | | | | | |
| Previous Employer's Name | | | | | | |
| Previous Employer's Phone | | | | | | |
| Length of Employment | | | | | | |
| Name of Bank | | | | | | |
| Branch | | | | | | |
| Account Number(s) and Type | | | | | | |
| Other Income or Assets | | | | | | |
| (Please Specify) | | | | | | |
| Year, Make and Colour of Auto | | | | | | |
| Licence No. (Auto) | | | | | | |
| Driver's Licence No. | | | | | | |
| Social Insurance No. | | | | | | |
| Date of Birth (D/M/Y) | | | | | | |
| Photo ID Provided (specify type) | | | | | | |
| REFERENCES: Two personal (other | er than relatives) and one credit other than the | aforementioned Bank. Must be completed in full. | | | | |
| NAME | The relatives of and one oreal other than the t | | | | | |
| ADDRESS | | | | | | |
| | | | | | | |
| PHONE | | | | | | |
| NAME | | | | | | |
| ADDRESS | | | | | | |
| PHONE | | | | | | |
| NAME | | | | | | |
| ADDRESS | | | | | | |
| PHONE | | | | | | |
| IN CASE OF EMERGENCY, Contact next of kin: | | | | | | |
| NAME | | | | | | |
| ADDRESS | | | | | | |
| PHONE | | | | | | |
| RELATIONSHIP | | | | | | |
| | | | | | | |
| I/We certify that the above information is complete and correct. | | | | | | |
| | | | | | | |
| | | | | | | |
| (Witness) | | (Applicant 1) | | | | |
| | | | | | | |
| (Witness) | | (Applicant 2) | | | | |

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