


Beacon Tower  
RENTAL APPLICATION

Waterloo Regional  
Apartment Management Association

Apt. No.

DATE: .....

TO:  The Equitable Life Insurance Company of Canada    Operating as: Beacon Tower Apartments..... (Landlord)

25 Westmount Road North      Waterloo ON    N2L 5G7      Tel. No: (519) 884-5551

1 . APPLICANT(S)	APPLICANT 1	APPLICANT 2
NAME:		
PRESENT ADDRESS:		
TELEPHONE:	Home:	Home:
	Business:	Business:

2. RENTAL PREMISES APPLIED FOR:

Suite No:	Address: 25 Westmount Road North, Waterloo	Unit Type: <input type="checkbox"/> 1 Bedroom; <input type="checkbox"/> 2 Bedroom; <input type="checkbox"/> 3 Bedroom
PARKING PRIVILEGES REQUIRED: (specify # in each category)	No. of Private Automobiles:	<input type="checkbox"/> Penthouse A    or <input type="checkbox"/> Penthouse B
	Nil:                      Outside:                      Underground:                      Covered:                      Garage:	
NOTE: NO DOGS, CATS, OR OTHER PETS OR ANIMALS ALLOWED.		Applicant(s) Signature(s) _____ re: NO PETS

3. PROPOSED OCCUPANT(S):

NAME(S)	DATE OF BIRTH (D / M / Y)	NAME(S)	DATE OF BIRTH (D / M / Y)
Term to Commence (dd/mm/yyyy)	Term to End (dd/mm/yyyy)		Date accommodation required (dd/mm/yyyy)

4. (i) RENTAL INFORMATION (includes discount specified in 4(i)):

Monthly Rental	\$	The Applicant(s) agree to pay for the following services and facilities applicable to the Rented Premises:	
Parking	\$		
Air Conditioner	\$	Electricity: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
Appliances	\$	Water: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional services (specify)	\$	Gas: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional services (specify)	\$	Heat: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional services (specify)	\$	Water Heater: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
Additional services (specify)	\$	Cablevision: .....	<input type="checkbox"/> Yes <input type="checkbox"/> No
TOTAL MONTHLY RENTAL .....	\$	Other (specify) .....	<input type="checkbox"/> Yes <input type="checkbox"/> No

(iii) SUMMARY OF MONIES TO BE PAID:

Total Monthly Rental for the first month's rent	\$
Pro-Rated Rent	\$
Deposit towards last month's rent	\$
Refundable deposit for entry key/card	\$
TOTAL .....	\$

(iv) DEPOSIT RECEIVED WITH THIS RENTAL APPLICATION:	\$
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I/we hereby certify the information provided above and on the reverse of this form (Applicant's Particulars) to be true. I/We agree that upon acceptance of this Rental Application by the Landlord, I/We shall forthwith enter into a Tenancy Agreement incorporating the above terms into the Landlord's usual form which I/We have been given the opportunity to review, in which event the deposit shall be applied towards the rent of the last month's occupancy. IF I/WE SHOULD FAIL TO ENTER INTO SUCH TENANCY AGREEMENT, IN ADDITION TO ANY OTHER RIGHT TO DAMAGES ACCRUING TO THE LANDLORD, I/WE AGREE AND ACKNOWLEDGE THAT THE DEPOSIT SHALL BE FORFEITED.

If the Landlord is unable to give possession of the rented premises on the date of commencement of the term for any reason, the Landlord shall not be subject to any liability to the Applicant(s) and shall give possession as soon as the Landlord is able to do so. The rent shall abate until possession of rented premises is offered by the Landlord to Tenant(s). Failure to give possession on the date of commencement shall not in any way affect the validity of the Tenancy Agreement, the obligations of the Tenant(s) or in any way be construed to extend the term of this Tenancy Agreement.

In the event that a Tenancy Agreement is entered into, this Rental Application by the terms of clause 24 of the Tenancy Agreement will be deemed to form part of the Tenancy Agreement. Any omission or misstatement by the Applicant(s) in this Rental Application may result in the termination of your tenancy by the Landlord even after occupancy has been taken.

The Applicant(s) hereby gives permission to the Landlord or his Agent to use the information collected herein to obtain a consumer report; to contact employers, previous landlords, references; to enforce the terms of any Tenancy Agreement that may be subsequently entered into with the Applicant(s); or to reasonably use it otherwise to assess this Rental Application.

.....  
(Witness)

.....  
(Witness)

.....  
(Applicant 1)

.....  
(Applicant 2)

ACCEPTANCE BY THE LANDLORD

The Landlord hereby accepts this Rental Application/Offer to Lease for the Rented Premises as herein described.

.....  
(Date)

.....  
(Landlord or Agent)

APPLICANT'S PARTICULARS	APPLICANT 1	APPLICANT 2
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 (specify months/years)		
Occupation		
Annual Income		
Previous Employer's Name		
Previous Employer's Phone		
Length of Employment (specify months/years)		
Name of Bank		
Branch		
Account Number(s) and Type		
Other Income or Assets (Please Specify)		
Year, Make and Colour of Auto		
Licence No. (Auto)		
Drivers Licence No.		
Social Insurance No.		
Date of Birth (D/M/Y)		

What made you choose this accommodation?      Newspaper ☐      Referral ☐      Billboard ☐      Other ☐

REFERENCES: Two personal (other than relatives) and one credit other than the aforementioned Bank. Must be completed in full.

NAME		
ADDRESS		
PHONE		
NAME		
ADDRESS		
PHONE		
NAME		
ADDRESS		
PHONE		

IN CASE OF EMERGENCY, Contact next of kin:

NAME		
ADDRESS		
PHONE		

I/We certify that the above information is complete and correct.

..... (Witness)	..... (Applicant 1)
..... (Witness)	..... (Applicant 2)