

130 COSBURN AVE. APARTMENTS

130 Cosburn Ave., Toronto, Ontario M4J 2L7
T: 416-425-5854 F: 416-425-6502 e: cosburnave130@rogers.com www.royalyorkapartments.com

WELCOME TO 130 COSBURN AVE. APARTMENTS

Dear Applicant;

Thank you for your interest in residing at 130 Cosburn Ave. Apartments. Please provide us with the following information to ensure the timely processing of your Rental Application.

1. A reference letter from your landlord with a contact name and telephone number.
2. A reference letter from your banking institution (see attached form).
3. A reference letter from your employer stating start date, salary and employment location.
4. Photo identification, e.g. Driver's License, Passport, Metro Pass.
5. A Certified Cheque or Money Order equal to 2 months rent is required, first and last month. Should your application not be chosen, it will be returned to you,
6. Toronto Hydro request for service (attached).

The above information is requested on or before_____

If the information is not received within that time, we assume you are no longer interested in proceeding with your application. All information is kept confidential.

Apartment Insurance

You will be requested to show a copy of you apartment insurance. You may obtain apartment insurance through any insurance company. Please note that apartment keys may not be issued until the above information is provided.

Landlord/Agent Signature

Applicant Signature

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BANKING INFORMATION PROVIDED BY YOUR BANK

The following information is required for rental purposes of Bldg#____, Suite #____

Name of banking institution: (Bank Stamp)

Branch:_____

We hereby certify the balance of account#_____

In the name of:_____

Their address listed with us is:_____

Balance at this branch at the close of business on_____
was \$_____.

Account opened (date):_____.

There have been No ☐ Yes ☐ returned cheques.

The above customer has a loan at this branch.

Monthly payments for the loan are \$_____

Manager

Officer In Charge



TO: _____ (Landlord)
130 Cosburn Ave., Toronto, ON M4J 2L7 (Address)
(Street No.) (Street) (City) (Province) (Postal Code)

1. APPLICANT(S) PRESENT ADDRESS

(1) _____
Name Apt. No. Street City Postal Code

(2) _____
Name Apt. No. Street City Postal Code

TELEPHONES: Home _____ Business _____
Mobile _____ EMAIL: _____@_____

2. RENTAL PREMISES APPLIED FOR: UNIT TYPE
Suite No. _____ Address: _____ City _____
Parking privileges required for _____ private automobile(s): Outside _____ Underground _____ Covered _____ Garage _____
(specify number of spaces in each category)

NOTE: NO DOGS, CATS, OR OTHER PETS OR ANIMALS ALLOWED _____
Applicant's Signature(s) re: NO PETS

3. PROPOSED OCCUPANT(S):	DATE OF BIRTH (D/M/Y)	NAMES	DATE OF BIRTH (D/M/Y)
NAMES			

Term to commence _____ Term to end _____
Date accomodation required _____

4. (i) RENTAL INFORMATION: [Includes discount specified in 4(ii)]

Monthly Rental \$ _____
Parking \$ _____

Air Conditioner \$ _____
Additional services _____ \$ _____
(specify)
Additional services _____ \$ _____
(specify)
TOTAL MONTHLY RENTAL \$ _____

If the Rented Premises are subject to a rental discount, the amount of the discount shall be \$ _____ which shall be given as follows:

A Pro-Rated Rent of \$ _____ is to be paid in advance to cover the period from _____ to _____
Date Date

The Applicants agree to pay for the following services and facilities applicable to the Rented Premises and to provide written confirmation from applicable utilities prior to commencement of lease that utilities are in Applicants name(s): _____ Specify Yes or No

4. (ii) The charges listed in 4(i) above include a 2% Prompt Payment Discount which shall be given monthly only if Total Monthly Rental is paid on or before the first day of each month. This discount may be discontinued, in the Landlord's sole discretion, at any time after the expiry of the initial term of this Agreement.

Electricity ☒

Gas ☒

4. (iii) SUMMARY OF MONIES TO BE PAID

Total Monthly Rental for first month's rent \$ _____

Refundable deposit for entry key/card \$ _____
TOTAL \$ _____

Other: _____
Specify _____

Contract Deposit received with this Rental Application \$ _____

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 Contract Deposit shall be deemed to be a Rent Deposit and 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 CONTRACT 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 Applicants 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 the Tenant. 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 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 27 of the Tenancy Agreement will be deemed to form part of the Tenancy Agreement. Any omission or misstatement by the Applicants in this Rental Application may result in the termination of your tenancy by the Landlord even after occupancy has been taken.

The Applicant 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 contact agencies that provide landlord information; to enforce the terms of any Tenancy Agreement that may be subsequently entered into with the Applicant; or to reasonably use it otherwise to assess this Rental Application. It is agreed that where this Application is rejected, the Landlord shall not be required to give reasons therefore.

(Witness)

(Witness)

(Applicant 1)

(Applicant 2)

ACCEPTANCE; 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		
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 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		
RELATIONSHIP		

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

.....
(Witness)

.....
(Applicant 1)

.....
(Witness)

.....
(Applicant 2)