



FROM THE LEASING DESK OF TOWERS REALTY

INFORMATION REQUIRED TO PROCESS YOUR APPLICATION:

Payment of the security deposit (1/2 months rent) with the completed application must be received or the application will not be processed.

- We will accept cheque, money order, or debit payment for security deposit.

If more than one adult person is going to occupy the suite, all parties must fill out a separate application.

ADDITIONAL INFORMATION REQUIRED:

IF YOU ARE EMPLOYED

- A letter from your employer, confirming employment, length of employment and gross monthly or annual salary, or hourly salary with number of hours worked.

STUDENTS

- Verification of your income, such as bank statements, sponsorship or student loan papers
- Cosigner/Guarantor Application

INTERNATIONAL STUDENTS / INTERNATIONAL APPLICANTS

- A copy of your passport, valid visa, and verification of income, such as bank statements or sponsorship papers
- Cosigner/Guarantor Application

SOCIAL ASSISTANCE RECIPIENTS

- Your caseworkers name and phone number, and your case number
- Social Assistance Rental Form to be completed by office for you to submit to your worker
- Cosigner/Guarantor Application

Please note that we may request or require additional information depending on individual circumstances

REFERENCE/CREDIT INQUIRY CONSENT FORM

I hereby give Towers Realty Group permission to contact current/previous landlord(s) for rental references, and consent to a credit inquiry.

I also give permission to contact employer(s) with reference to confirming employment income.

Only questions relating to consideration for tenancy will be asked from the above.

Date: _____

Name (please print): _____

Applicant Signature : _____

Current Address: _____

FOR OFFICE USE ONLY

RENTAL REFERENCE:

1. Was the rent paid on time? _____

2. Were there NSF cheques? _____

3. When is their lease up? Did they give proper notice? _____

4. Where there any noise disturbances? _____

5. Would you rent to them again? _____

6. How much was the monthly rent? _____

SUITE RENTAL APPLICATION

Where did you hear about this suite: Wpg Free Press Renters Guide Building Sign Other (specify) _____

Please Note: **EACH APPLICANT MUST FILL OUT A SEPARATE APPLICATION**

- No Pets allowed
- Security deposit payment must accompany this application.
- The first month's rent must be paid in full prior to occupancy.
- Damage deposit becomes property of landlord and subject to fees if applicant cancels after application is approved.

APARTMENT BEING APPLIED FOR: Apartment Building: _____ Suite #: _____

Occupancy Date: _____ Rent: \$: _____ Parking Stalls Required: 0 1 2

PERSONAL INFORMATION:

Miss Ms. Mr. Mrs. First: _____ Middle: _____ Last: _____

Birth Date: _____ S.I.N. - Canada _____ Drivers License #: _____
(mm / dd/ yyyy) Province (or State) of Issue

Home Phone #: _____ Work Phone #: _____ Cell Phone #: _____ Email: _____

PRESENT ADDRESS:

Apt.: _____ Street: _____ City: _____ Postal: _____

Landlord: _____ Phone Number: _____ How Long? _____ Rent Amount: \$ _____

PREVIOUS ADDRESS:

Apt.: _____ Street: _____ City: _____ Postal: _____

Landlord: _____ Phone Number: _____ How Long? _____ Rent Amount: \$ _____

CURRENT EMPLOYER:

Name: _____ Address: _____ Phone Number: _____

Occupation: _____ What's your monthly gross income? _____ How Long? _____

PREVIOUS EMPLOYER: If current employer is for a time period of less than one year.

Name: _____ Address: _____ Phone Number: _____

Occupation: _____ What's your monthly gross income? _____ How Long? _____

OCCUPANTS: Names of other intended occupants of suite in addition to applicant.

1) Name: _____ Relationship: _____ Age: _____
(if under 18)

2) Name: _____ Relationship: _____ Age: _____
(if under 18)

CONTACTS: In case of emergency, please provide next of kin.

1) Name: _____ Address: _____ Phone: _____ Relationship: _____

2) Name: _____ Address: _____ Phone: _____ Relationship: _____

Do you have any outstanding monies owed to a previous landlord? Yes No

Have you been evicted or mediated an eviction from a previous address under your current name or any other name (maiden, etc.)? Yes No

I understand that misrepresentation or omission of facts called for is cause for rejection of application or termination of lease.
 In connection to the tenancy applied for, I hereby consent to a Credit Inquiry by Towers Realty Group Ltd. and/or a personal reporting agency.
 We(I) acknowledge having viewed the premise and agree to lease the premise in its present condition.

APPLICANT'S SIGNATURE: X _____ **DATE: X** _____

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Bldg. #	Building Name	Address	Suite #	Postal Code	<input type="checkbox"/> Month to Month <input type="checkbox"/> Sublet
Last Name #1		First Name #1			Transfer From:
Last Name #2		First Name #2			
Co-Signer/Guarantor Last Name		Co-Signer/Guarantor First Name			

LEASE TERMS	Move in Date	Lease Start	Lease Expiry	Security Deposit \$ _____
	Monthly Rent	Rent Discount	Pro-Rated Rent	Date Paid: _____ <small>(mm/dd/yyyy)</small>
	Parking Rate	Locker Rental		Receipt#: _____ <input type="checkbox"/> debit <input type="checkbox"/> cash <input type="checkbox"/> cheque

CO-SIGNER RENTAL APPLICATION

CO-SIGNER: A person who accepts joint responsibility of the tenancy, including rent, damages, and any other financial responsibilities regarding the tenancy.

Please Note: **CO-SIGNER**

- No Pets allowed
- The first month's rent and security deposit must be paid in full prior to occupancy.

APARTMENT BEING APPLIED FOR:

Apartment Building: _____ Suite #: _____

CO-SIGNING FOR: _____

PERSONAL INFORMATION:

Miss Ms. First: _____ Last: _____

Mr. Mrs. Middle: _____

Birth Date: _____ S.I.N. - Canada _____ Drivers License #: _____
(mmm / dd / yyyy) (S.S.N.-USA) Province (or State) of Issue

Home Phone: _____ Work Phone Number: _____ Cell Number: _____

PRESENT ADDRESS:

Apt.: _____ Street: _____ City: _____ Postal: _____

How Long? _____

PREVIOUS ADDRESS:

Apt.: _____ Street: _____ City: _____ Postal: _____

How Long? _____

CURRENT EMPLOYER:

Name: _____ Address: _____ Phone Number: _____

Occupation: _____ What's your monthly gross income? _____ How Long? _____

RELATIONSHIP TO APPLICANT:

1) Name: _____ Relationship: _____

2) Name: _____ Relationship: _____

Have you any unpaid adjustments outstanding against you or your spouse at this time? Yes No

Have you ever been evicted from, or asked to leave any previous accommodation? Yes No

Did you leave any previous accommodation owing rent? Yes No

If you wish to explain, please use the back of this form.

I understand that misrepresentation or omission of facts called for is cause for rejection of application or termination of lease.

CONSENT TO THE COLLECTION AND USE OF YOUR PERSONAL INFORMATION

Towers Realty Group Ltd collects and uses your personal information to assess your application for tenancy such as verifying your credit and rental history, including contacting your prior landlords. Towers Realty may also use your personal information to enforce its rights, or the rights of a Property Owner, under any tenancy agreement, including for the collection of a debt owed you. Towers Realty will retain your personal information until a reasonable period of time after your tenancy, if approved, has ended. By signing below, you consent to the use of your personal information as herein described and you authorize the disclosure by third parties, including any of your prior landlords, of your credit information and rental history to Towers Realty.

CO-SIGNOR'S SIGNATURE: _____ **DATE:** _____

If lease agreement is approved, co-signor will be required to also sign lease agreement.