



TENANCY APPLICATION FORM

1. Personal Details

First Name: Last Name: Initial:
(as appears on your Driver License or Passport)

Date of Birth: / / Sex: Male Female

Driver License Number: State of Issue:

Alternate ID Number: Type:

Current Address: City:

Postal Code: E-mail:

Home Ph: (.....) - Cell Ph: (.....) -

Occupation:

2. Property Applying For

Address: City:

Postal Code: Lease Term: Year(s) Month(s)

Date Property to be occupied: / /
MM DD YYYY

Rental Amount: \$ Per Month or \$ Per Year

Name(s) of other Applicants:

No. of Person Occupying: Adult(s) Children

Ages of Children: (if applicable)

3. Current Tenancy Details

How long have you lived at your current address? Year(s) Month(s)

Name of Landlord/Agent (if applicable)

Landlord/Agent Phone Number: (.....) -

Rent paid per month: \$

Reasons for leaving:



4. Previous Rental History

Previous Address:
City: Postal Code:
How long have you lived at your previous address? Year(s) Month(s)
Name of Landlord/Managing Agent/Realtor:
Landlord/Managing Agent/Realtor Ph Number: (.....) -
Rent paid per month: \$
Reasons for leaving:
.....

5. Current Employment Details

Occupation:
Employer's Name:
Employment Address:
City: Postal Code:
Employer Phone Number: (.....) -
Contact Name (e.g. Manager / Supervisor):
Length at current employment: Year(s) Month(s)
Monthly Salary: \$ or Yearly Income: \$
Other Income (please specify):

6. Previous Employment Details*

* if current length of employment if less than two (2) years

Occupation:
Employer's Name:
Employment Address:
City: Postal Code:
Employer Phone Number: (.....) -
Contact Name (e.g. Manager / Supervisor):
Length at current employment: Year(s) Month(s)
Monthly Salary: \$ or Yearly Income: \$



7. If Student, please complete the following

Faculty: Department:

This is your: 1st year 2nd year 3rd year 4th year Graduate School

Student Number:

Are you enrolled in the Co-op program? (if applicable) Yes No

Parents Name:

Parent(s)' Phone Number:

Parents Address Overseas:

8. Emergency Contact (not planning to live with)

First Name: Last Name:

Relationship: Phone Number: (.....) -

Address:

City: Postal Code:

9. Personal References

1. Reference name:

Occupation:

Relationship: Phone Number: (.....) -

2. Reference name:

Occupation:

Relationship: Phone Number: (.....) -



10. Collection Statement

We collect your personal information for the purpose of assessing the risk of providing you with the tenancy, processing your tenancy application, preparing the lease or tenancy agreement, collecting rental payments and other purposes related to the management of your tenancy. Your personal information will not be disclosed to other people or to external organisations. However, if necessary, we may disclose personal information about you to:

- ▶ the property owner, its lawyers and contractors;
- ▶ tenancy tribunals and courts;
- ▶ service providers for repairing/maintaining the property.
- ▶ if you consent to us doing so;

11. Declaration

I acknowledge that this is an application to lease this property and that my application is subject to the owner's approval and the availability of the premises on the due date. No action will be taken against the owner or agent if the application is unsuccessful or upon acceptance should the premises be unavailable for occupation on the date for whatever reason. I hereby offer to rent the property from the owner under a lease to be prepared by the Agent pursuant to the residential Tenancies Act.

I declare that all information contained in this application is true and correct to the best of my knowledge and given of my own free will. I declare that I have inspected the property and am satisfied that the premises are in neat and clean condition, and that I am not bankrupt.

I hereby authorize the agent to whom this application is submitted to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement. This consent is given pursuant to Chapter 78, Section 12, of the Credit Reporting Act, R.S.B.C. 1979.

Date: / / Applicant Signature: x

MM DD YYYY

Witness Signature: x



100 Point of Identification Check

Please provide photocopies of the documents that are checked “YES”

At least one (1) form of identification must be a photo ID

Type	No. of Points	YES / NO
Driver License	40 points	
Passport	40 points	
Permanent Residence Card	40 points	
Citizenship Card	40 points	
Other Photo ID	30 points	
Previous tenancy reference	20 points	
Bank Statement	10 points	
Telephone Account	10 points	
Electricity Account	10 points	
Motor vehicle registration	10 points	
Other, please specify:		