



EDGEWOOD
PROPERTY MANAGEMENT

65 GRANT TIMMINS DR., KINGSTON, ON K7M 8N3
PH: 613.531.3000 FAX: 613.777.1253 EMAIL: MAIL@EDGEWOODPM.COM

RENTAL APPLICATION FORM

PREMISES APPLIED FOR: Address _____

PROPOSED MOVE IN DATE: _____

NAME OF PROPOSED OCCUPANTS	BIRTH DATE	NAME OF PROPOSED OCCUPANTS	BIRTH DATE

Will you be moving in a dog, cat or other pet to the unit?

If **YES** – specify type and number Dogs _____ Cats _____ Other _____

If **NO** – I will not bring in a pet into the rental unit. _____

(Signature)

THE RENT IS TO BE DELIVERED TO THE LANDLORD OR HIS AGENT ON THE FIRST DAY OF EACH MONTH

The undersigned agrees to contract with the supplier the following services not included in the rent for the desired premises:

The following is included in the rent: _____

Amount due prior to occupancy: Pro Rate \$ _____ FMR \$ _____ LMR \$ _____

Total Due: \$ _____ Total Received: \$ _____

The applicant acknowledges and agrees that in the event that this application is accepted and in the event that the existing tenant occupying the above-described premises fails to vacate same prior to the commencement of the term of occupancy herein referred to above, the Applicant(s) shall only be entitled to the return of any monies paid with this application, without interest or deduction, and any tenancy or right thereto resulting from the acceptance of this application will be at an end. The intent being that neither the Landlord nor its Agent will be liable or responsible to the Applicant(s) for any loss, damages or costs incurred by the Applicant(s) resulting from the existing tenant's failure to vacate the premises and inability of the Landlord to deliver possession of same to the Applicant(s).

The undersigned consents to the obtaining of such information as the Landlord may deem necessary at any time in connection with the undersigned in conjunction with the premises hereby applied for or any renewal or extension of my/our tenancy agreement. The undersigned also consents to the disclosure of any information concerning the undersigned to any credit reporting agency or to any person with whom the undersigned has or proposes to have financial relations.

Witness

Applicant

Witness

Applicant

Witness

Applicant

Accepted this _____ day of _____ 20____ Landlord or Agent _____

APPLICANTS PARTICULARS

PLEASE COMPLETE IN FULL AND PRINT CLEARLY. IT IS ONLY THROUGH CAREFUL SCREENING OF APPLICANTS THAT WE CAN ASSURE YOU GOOD NEIGHBOURS.

DETAILS		APPLICANT # 1	APPLICANT # 2	APPLICANT # 3
NAME				
S.I.N. NUMBER				
DATE OF BIRTH				
CURRENT ADDRESS				
CITY & POSTAL CODE				
LENGTH AT ADDRESS				
CELL PHONE				
EMAIL ADDRESS				
BUSINESS PHONE				
LANDLORD'S NAME				
LANDLORD'S PHONE				
PREVIOUS ADDRESS				
CITY & POSTAL CODE				
LENGTH AT ADDRESS				
LANDLORD'S NAME				
LANDLORD'S PHONE				
MONTHLY INCOME				
EMPLOYER'S NAME				
EMPLOYER'S PHONE				
OCCUPATION				
LENGTH OF EMPLOYMENT				
PREVIOUS EMPLOYER				
EMPLOYER'S PHONE				
OCCUPATION				
LENGTH OF EMPLOYMENT				
NAME OF BANK				
BRANCH ADDRESS				
MAKE OF AUTO				
YEAR AND COLOUR				
LICENCE PLATE #				
DRIVER'S LICENCE #				
E C M O N E N T G A R T M E N T C Y	NAME			
	ADDRESS			
	PHONE #			
	RELATIONSHIP			

THE ABOVE INFORMATION IS STRICTLY CONFIDENTIAL

THE UNDERSIGNED CERTIFIES THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT.

APPLICANT # 1 SIGNATURE

APPLICANT # 2 SIGNATURE

APPLICANT # 3 SIGNATURE

This Application Form is prepared for the exclusive use by members of:
Kingston Rental Property Owner's Association