

# Application for Residential Tenancy



QUALITY  
CREDIT REPORTING

## IMPORTANT

FOR A SPEEDY APPROVAL AND A FAIR ASSESSMENT IF YOUR RENTAL APPLICATION, ACCURATE COMPLETION IS ABSOLUTELY ESSENTIAL. ALLOW AMPLE TIME FOR COMPLETION. DO NOT RUSH. PLEASE PRINT.

**APPLICANT** Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Insurance #: \_\_\_\_\_ Driver's Licence #: \_\_\_\_\_  
M D Y

**Present Address:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ How long? \_\_\_\_\_ Home Tel: \_\_\_\_\_

Name of Present Landlord: \_\_\_\_\_ Landlord's Tel: \_\_\_\_\_ Monthly Rent: \$ \_\_\_\_\_

Reason for Vacating: \_\_\_\_\_

**Former Address:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ How long? \_\_\_\_\_ Home Tel: \_\_\_\_\_

Name of Former Landlord: \_\_\_\_\_ Former Landlord's Tel: \_\_\_\_\_

Reason for Vacating: \_\_\_\_\_

**Name and Address of Present Employer:** \_\_\_\_\_

How long? \_\_\_\_\_ Position: \_\_\_\_\_ Bus. Tel: \_\_\_\_\_ Verifiable Gross Annual Income: \$ \_\_\_\_\_

Name of Supervisor / Person you report to: \_\_\_\_\_ Telephone # of this person: \_\_\_\_\_

**Name and Address of Previous Employer:** \_\_\_\_\_

How long? \_\_\_\_\_ Position: \_\_\_\_\_ Bus. Tel: \_\_\_\_\_ Previous Gross Annual Income: \$ \_\_\_\_\_

**Name and Address of Your Bank:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Account #: \_\_\_\_\_

Name(s) on account: \_\_\_\_\_

## YOUR LIABILITIES - PLEASE LIST ALL CURRENT CREDIT OBLIGATIONS

Name of Creditor(s)	Monthly Payment \$	Amount Outstanding \$
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Provide Two Personal References (Full Name, Address and Telephone Numbers):

1. \_\_\_\_\_

2. \_\_\_\_\_

HAVE YOU EVER BEEN EVICTED OR TAKEN TO COURT BY A LANDLORD OR OTHERWISE VIOLATED A TENANCY AGREEMENT?  YES  NO  
IF YES, PROVIDE DETAILS:

DO YOU HAVE ANY OTHER INCOME?  YES  NO IF YES, STATE AMOUNT AND SOURCE: \_\_\_\_\_

**CO-APPLICANT** Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Initial: \_\_\_\_\_

Date of Birth: 

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 Social Insurance #: \_\_\_\_\_ Driver's Licence #: \_\_\_\_\_

**Present Address:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ How long? \_\_\_\_\_ Home Tel: \_\_\_\_\_

Name of Present Landlord: \_\_\_\_\_ Landlord's Tel: \_\_\_\_\_ Monthly Rent: \$ \_\_\_\_\_

**Name and Address of Present Employer:** \_\_\_\_\_

How long? \_\_\_\_\_ Position: \_\_\_\_\_ Bus. Tel: \_\_\_\_\_ Verifiable Gross Annual Income: \$ \_\_\_\_\_

**Name and Address of Your Bank:** \_\_\_\_\_

City/Town: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Account #: \_\_\_\_\_

**YOUR LIABILITIES - PLEASE LIST ALL CURRENT CREDIT OBLIGATIONS**

Name of Creditor(s)	Monthly Payment \$	Amount Outstanding \$
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What is your relationship to the Applicant? \_\_\_\_\_

DO YOU HAVE ANY OTHER INCOME?  YES  NO IF YES, STATE AMOUNT AND SOURCE: \_\_\_\_\_

**THE OCCUPANTS** ONLY THE FOLLOWING PERSONS MAY OCCUPY THE DEMISED PREMISES:

1. _____	Age _____	3. _____	Age _____
2. _____	Age _____	4. _____	Age _____

**YOUR CONSENT**

I/We, the applicant and co-applicant(s) hereby take notice that reports will be sought by the landlord/lessor, its agents, Quality Credit Services Limited and their affiliates containing personal information, credit information, tenancy information, employment information and other information and I /We consent to the receipt disclosure and exchange of such information by the landlord/ lessor, its agents, Quality Credit Services Limited, their subscribers and affiliates, to other business related parties and consumer reporting agencies.

Date: \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

Witness: \_\_\_\_\_ Signature of Co-Applicant \_\_\_\_\_

NOTE: IF ADDITION SPACE IS REQUIRED TO FULLY ANSWER THE QUESTIONS CONTAINED IN THIS APPLICATION, YOU ARE REQUIRED TO ATTACH A SEPARATE SHEET. REVERSE SIDE FORMS PART OF THIS APPLICATION.