



(Form confidential once completed)

RESIDENTIAL RENTAL APPLICATION

For inquiries about the rental property, please contact Francesco Raso,
Generations Property Management at email address: francesco@info-generations.ca
Phone: (613) 890-6117

RENTAL PROPERTY

Rental Property Address: 207 Nelson St. E., Hawkesbury, ON K6A 1L6

Date of Availability: July 1, 2025

Minimum Term of Lease (Fixed): Minimum 1 year and month-to-month thereafter

Monthly Rent Payment: \$1,780.00 (water included)

Plus partial last month's rent of: \$1,000.00

Tenant Pays: Hydro, Cable, Phone, Internet, Tenant Insurance

Compliance: Allowance of 1 domestic pet. No smoking, no vaping, no smoking of marijuana inside the property. Tenant is responsible for snow removal and lawn maintenance.

RENTAL APPLICATION REQUIREMENTS

To complete the application process, the tenant will submit the following to a Generations Property Management representative:

1. Present government issued photo ID: valid driver's license, or provincial ID, or passport;
2. Submit proof of employment letter (or benefits), and most recent pay cheque stub or statement;
3. Provide written proof of your credit score, available from most online banking services;
4. Consent to have a police record check performed by the property management company;
5. Purchase tenant insurance and provide confirmation at the time of signing the rental agreement.

PRIMARY APPLICANT'S PERSONAL INFORMATION

Name: _____

Current Address: _____

Email Address: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Date of Birth: _____ (yyyy-mm-dd)

DESIRED MOVE-IN DATE: _____ (yyyy-mm-dd)

CO-APPLICANT'S PERSONAL INFORMATION

(if applicable. Any other adult living at the address who is over 18yrs old, and who is not defined as a dependent of the applicant must be listed as a co-applicant)

Name: _____

Email Address: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Date of Birth: _____ (yyyy-mm-dd)

OTHER OCCUPANT'S INFORMATION - 1

*Any other adults living in the rental property,
or dependents or child(ren) of the applicant(s) who are under 18 years of age*

Name: _____

Relation to Applicant: _____

Date of Birth: _____(yyyy/mm/dd)

OTHER OCCUPANT'S INFORMATION - 2

*Any other adults living in the rental property,
or dependents or child(ren) of the applicant(s) who are under 18 years of age*

Name: _____

Relation to Applicant: _____

Date of Birth: _____(yyyy/mm/dd)

Important: The capacity of this rental property is set to 4 residents.

RENTAL HISTORY

Current Address/City/Province/Postal Code: _____

How long have you been residing at this address? _____yr(s)_____mths or, N/A
(If non-applicable, move to next section entitled Income Details)

Monthly Rent: _____

Landlord's First/Last Name: _____

Landlord's Contact Number: _____

Reason(s) for leaving this property: _____

Have you, or the co-applicant, ever been evicted from a rental residence?

Yes ☐ No ☐

Have you, or the co-applicant, missed two or more rental payments in the past 12 months?

Yes ☐ No ☐

Have you, , of the co-applicant, ever refused to pay rent when due?

Yes ☐ No ☐

If you have answered YES to any of the above, please state your reasons and/or
circumstances:

INCOME DETAILS

Status of Applicant: ☐ Full-Time Employment ☐ Part-time Employment
☐ Student ☐ Disabled ☐ Unemployed ☐ Retired

Current Employer / Source of Income: _____

Status of Co-Applicant: ☐ Full-Time Employment ☐ Part-time Employment
☐ Student ☐ Disabled ☐ Unemployed ☐ Retired

Current Employer / Source of Income: _____

Total Household Income Annually (Gross / Pre-Tax): _____

PROOF OF INCOME

The applicants (and co-signer, if required) will be required to provide proof of their income. Acceptable documentation includes latest pay stub with employer's letter/certificate, statement of benefit and bank statements (90 days), or copies of the previous year's tax return.

CO-SIGNER (If Required)

A co-signer may be required if the applicants have less than 2 years of current employment history, have temporary or part-time employment; a credit score less than 660, or an annual household income of less than \$72,000.

Co-Signer's Name: _____

Email Address: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Date of Birth: _____(yyyy-mm-dd)

Status of Co-Signer: ☐ Full-Time Employment ☐ Part-time Employment
☐ Student ☐ Disabled ☐ Unemployed ☐ Retired

Current Employer / Source of Income: _____

Total Annual Income (Gross / Pre-Tax): _____

CREDIT HISTORY AND BACKGROUND CHECK AUTHORIZATION

Have you, or the co-applicant, declared bankruptcy in the past seven (7) years? Yes ☐ No ☐

Have you, or the co-applicant, filed a consumer proposal in the past seven (7) years? Yes ☐ No ☐

Do you, and the co-applicant, consent to a credit check? Yes ☐ No ☐

Is there anything you wish to disclose to us prior to reviewing your **credit check(s)**?

CRIMINAL BACKGROUND CHECK AUTHORIZATION

Have you, or the co-applicant, ever been charged and found guilty of a criminal offense for which you have not received a pardon? Yes ☐ No ☐

Do you, and the co-applicant, consent to a criminal check? Yes ☐ No ☐

Is there anything you wish to disclose to us prior to reviewing your **criminal check(s)**?

ADDITIONAL INFORMATION

I. PETS

The Landlord allows 1 domestic pet inside the rental property. The tenant will be held responsible for timely pet waste removal and any property damage. Any ongoing, unreasonable property damage, excessive noise and disturbances; or danger caused by the domestic pet will require its removal from the premises, or end the rental agreement with 60 days notice.

II. SMOKING

The Landlord does not allow smoking of cigarettes, or marijuana, or vapes in the rental property. Smoking of any kind inside the property will cause the termination of the rental agreement with 60 days notice.

III. WATERBEDS

The Landlord does not allow the use of waterbeds on the premises.

IV. PARKING

The rental property includes 2 dedicated parking spaces in the form of outdoor parking and public street parking for the tenant's use.

I/We declare that the information I/We have provided is true and correct, and contains no misrepresentations. If misrepresentations are found after a residential lease agreement is entered into between the Generations Property Management and the Applicant(s), Generations Property Management shall have the option to terminate the residential lease agreement and seek all available remedies.

The Applicant(s) authorize(s) Generations Property Management and their representative to verify all references and facts, including but not limited to current and previous landlords, employers and personal references. The Applicant(s) understand(s) that incomplete or incorrect information provided in this application may cause a delay in processing or may result in the denial of the application.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

N.B. If this application is sent to Generations Property Management, %
Francesco@info-generations.ca from the applicant's email address of record, with a copy (cc) to
the co-applicant's email address of record, this will be considered equivalent to a digital
signature, and will not require physical signature(s).