



Residential Rental Application

For inquiries about this property, please contact:
 Laurie May Peroff
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Rental Property

Address: _____

Date of Availability: immediately or _____

Type of Lease Term: Fixed term

Minimum Term of Lease: annual (1-July to 30-June)

Monthly Rental Payment: \$_____ +utilities + pet

Refundable Security Deposit: \$_____

Non-Refundable Security Deposit (Pets): \$_____

Applicant's Personal Information

Name:			
Email Address:			
Phone:		Alternate Phone:	
Date of Birth:		SIN* (for credit check)	
Desired MOVE-IN Date			

Co-Applicant's Personal Information

Name:			
Email Address:			
Phone:		Alternate Phone:	
Date of Birth:		SIN* (for credit check)	

Please List Any Other Occupants (attach additional sheet, if necessary)

Name:			
Relationship		Date of Birth	
Name:			
Relationship		Date of Birth	
Name:			
Relationship		Date of Birth	

Rental History

Current Address:			
How long have you been at this address?	Monthly rent?	\$	
Landlord's Name			
Landlord's Email			
Landlord's Phone	May I contact this landlord?		
Reason for leaving?			

Previous Address:			
How long did you stay at this address?	Monthly rent?	\$	
Landlord's Name			
Landlord's Email			
Landlord's Phone			
Reason for leaving?			

Have you ever been evicted from a rental property? YES NO

Have you missed two or more rental payments in the last 12 months? YES NO

Have you ever refused to pay rent when due? YES NO

If you have answered YES to any of the above, please explain:

Parking -

condos: included in rental payment for one vehicle. Pls discuss additional parking needs directly with the landlord or property manager.

houses/garages:

Garage parking for ___ vehicle(s) is available.
Additional rent is \$____ / mo

Off-street driveway parking for ___ vehicle(s) is available.
Additional rent is \$____ / mo

Street parking only - no additional fee.

Employment Details

Applicant's Current Employment (if less than 2 years, please attach additional information)

Employment Status: Full-time Part-time Student Unemployed Retired

Current Employer			
Your job title			
Date Hired		Monthly Income	
Supervisor's name			
Supervisor's contact info (phone or email)			

Co-Applicant's Current Employment (if less than 2 years, please attach additional information)

Employment Status: Full-time Part-time Student Unemployed Retired

Current Employer			
Your job title			
Date Hired		Monthly Income	
Supervisor's name			
Supervisor's contact info (phone or email)			

Any additional sources of income?

Proof of Income

The applicant(s) is required to attach proof of income to this rental application. Acceptable documentation includes pay stubs, employer's letter/certificate, bank statements or copy of previous year's tax return.

Credit History

	Applicant	Co-Applicant
Have you declared bankruptcy in the last 7 years:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Do you consent to a credit check:	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

*signature and SIN requested below

Is there anything we may find in the credit check that you want to comment on?

Pets

No Pets Allowed

OR

The landlord allows pets in the rental property with the following conditions/restrictions:

- 1. Maximum of 2 well-behaved pets
- 2. Up-to-date vaccination records required
- 3. Additional pet fee of \$25 per pet per month

Do you own a pet? No Pets 1 pet 2 pets

Are your pets vaccinations current: YES NO

If applicable, please describe your pets. Include type of pet, breed, name, height/weight.

Smoking

The landlord does NOT allow smoking of cigarettes in or near the rental property.

The landlord does NOT allow smoking of marijuana in or near the rental property.

Waterbeds

The landlord does NOT allow waterbeds on the premises.

I declare the information I have provided is true and correct, and contain no misrepresentations. If misrepresentations are found after a residential lease agreement is entered into between the Landlord and the Applicant, the Landlord shall have the option to terminate the residential lease agreement and seek all available remedies.

The Applicant and Co-Applicant authorize the Landlord to verify all references and fact, including but not listed to current and previous landlords, employers and personal references. The Applicant and Co-Applicant understand that incomplete or incorrect information provided in the application may cause a delay in processing or may result in the denial of application.

Signature of Applicant: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

Please complete to acknowledge giving your consent for the landlord or his/her representative to conduct a credit check.

Signature of Applicant: _____ SIN (optional): _____

Signature of Co-Applicant: _____ SIN (optional): _____

Is there anything else you would like to share? _____
