

PRUDENTIAL PROPERTY MANAGEMENT LTD.
1315 Lawrence Avenue East, Suite 515, Toronto, ON M3A 3R3*
Tel: 416-390-9911 Fax: 416-390-9912 Email: info@ppml.ca

* This is the legal name and address of the Landlord provided for purposes of the Residential Tenancies Act, 2006 until subsequently notified.

RENTAL APPLICATION

Date: _____ ☐ New Application

Bldg. No.: 55	Bldg. Franklin Street South	Suite No.:	Type:
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NAME OF APPLICANTS FOR TENANCY:

(1) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____
(2) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____
(3) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____

NAME OF ADDITIONAL PROPOSED OCCUPANTS (including spouse, where not an applicant and children):

(1) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____
(2) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____
(3) _____ D.O.B. _____ ☐ M ☐ F S.I.N. _____

I understand and agree that if this application is accepted, no person other than those identified above may occupy the premises. Applicant's Initials: _____

RENTAL INFORMATION:

Term: 1 Year Proposed Occupancy Date: _____

DATE TERM BEGINS: FIRST DAY OF _____ DATE TERM ENDS: LAST DAY OF _____

Total Monthly Rent payable in advance on the first day of each month*:

* Where the amount is left blank, or "N/A" is inserted, the item is **not** to be provided as part of the tenancy.

Item	Amount/Month
Rented premises:	\$ _____
Parking _____ # of Spaces	\$ _____
Other: [specify _____]	\$ _____
Total Monthly Rent:	\$ _____

Last Month's Rent Deposit: \$ _____

A Pro-Rated Rent of \$ _____ is payable in advance to cover the period from _____ to _____ which shall be treated as part of the term of the tenancy.

I agree to pay the supplier directly, or to pay the Landlord as a reimbursement of charges paid on my behalf for each of the following services applicable to the rented premises:

NOTE: Applicant acknowledges that hydro and basic internet are extra for the first year of tenancy and will need to pay the landlord on top of the rent \$79.00 per month to cover the same.

Hydro	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Internet	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Cooling	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Water	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Heating	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Other (specify)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

APPLICANT'S PARTICULARS: [Must be completed in full before application will be considered]

	Applicant (1)	Applicant (2)	Applicant (3)
Name			
Present Address Unit/ Street Address			
Province/Postal Code			
Present Monthly Rent			
Length of Occupancy			
Reason for Leaving			
Home phone			
Fax			
Landlord's Name			
Landlord's Phone No.			
Proof of Identification			
Prior Address (if less than 3 years)	Applicant (1)	Applicant (2)	Applicant (3)
Previous Address Unit/ Street Address			
Province/Postal Code			
Monthly Rent			
Length of Occupancy			
Reason for Leaving			
Landlord's Name			
Landlord's Phone No.			
Employment	Applicant (1)	Applicant (2)	Applicant (3)
Employer #1: Name			
Occupation			
No. Of Years			
Annual Income			
Employer's Address			
Employer's Telephone			

If employment less than 3 years, provide information of previous employers and occupation to total 3 years:			
Employer #2: Name & Address			
Occupation			
Dates of Employment			
Employer #3: Name & Address			
Occupation			
Dates of Employment			
Credit Information	Applicant (1)	Applicant (2)	Applicant (3)
Primary Bank [Name, Branch]			
Account Type & No.	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____
Secondary Bank [Name, Branch]			
Account Type & No.	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____	<input type="checkbox"/> hq. <input type="checkbox"/> v. <input type="checkbox"/> ust Acct. No.: _____
Spouse's Employer			
Address			
Spouse's Income			
Vehicle Information	Applicant (1)	Applicant (2)	Applicant (3)
Driver's License			
Make of Vehicle			
Model and Year			
Vehicle License No.			
References [Must be completed in Full]			
#1: Name			
#1: Address			
#1: Telephone			
#2: Name			
#2: Address			
#2: Telephone			

IN CASE OF EMERGENCY CONTACT: _____

Phone No.: Tel: _____ Fax: _____ Relationship _____

If the property being applied is located within a building subject to the government of the Condominium Act, I/We agree to be bound by the provisions of the Condominium Act, R.S.O. 1998, and amendments thereto, the Declaration, the By-laws, the Rules, and the Regulation of said Condominium.

I/We acknowledge that the Landlords insurance on the premise does not cover personal property nor liability of the tenant. I/We agree not to do anything on the premises for which the Owner's/Landlord insurance if any, may be increased, and agree to hold the Owner/Landlord harmless from damages of any kind, including liability from injury to anyone regardless of fault during the Lease Term. I/We agree to have and maintain throughout the term of this lease a standard Tenant's Contents and Liability insurance on the premises.

I/We agree that the rent for the second year and any subsequent year may be increased by the maximum government guideline in accordance with the Residential Tenancies Act.

I/We agree to execute a Lease Agreement on the Manager's standard Lease form.

AGREEMENT: I/we consent to the landlord and its authorized agents obtaining any information about me/us as the landlord in its sole discretion may deem necessary, at any time in connection with the Rented Premises hereby applied for, the tenancy agreement, or matters arising there from, or any renewal or extension thereof. I/We hereby certify that the information provided on this Rental Application is true and accurate and acknowledge that any false statement or misrepresentation may lead to charges for fraud or other remedies available at law. I/we further consent to the disclosure of any information concerning me/us to any credit reporting agency, or to any person or company with whom I/we have, may have, or will in the future have a financial relationship. Dated at (City) _____, this day of _____, 2024.

_____ Witness	_____ Tenant: Print Name	_____ Sign Name
_____ Witness	_____ Tenant: Print Name	_____ Sign Name
_____ Witness	_____ Tenant: Print Name	_____ Sign Name

Acceptance by the Landlord:

The Landlord hereby accepts this application for the Rented Premises as described in this Rental Application:

_____ Date	_____ Signature of Landlord or Agent
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