## APPLICATION FOR RESIDENTIAL TENANCY

I/We hereby offer to rent from the I	Landlord: LIBRARY	, 170 FORT YOTK BLVD	UNIT	, TORONTO
For the term beginning the	day of	, 20	and ending	
the	day of	, 20		
The rent payable for the rented pren	nises is \$	(includes one	garage parking sp	oot) per month which
sum shall be payable in advance on	or before the first da	y of each and every month	of the said term. A	pro rated rent of
\$is payable i	n advance to cover the	e period from		_20
to	, 20			
The applicant(s) will be responsible	for: hydro, telepho	ne, cable TV and Internet	services.	
The following appliances, etc. belon	nging to the Landlord	are included in the rental:		
• Fridge, Stove, Dishwa	sher, Washer, Drye	r, Microwave and Custom	Blinds	
Any occupancy granted hereunder s for occupation by the Tenant.	hall be subject to the p	present Tenant vacating and	or the rented premi	ses being fully ready
It is understood that upon the accept within two (2) days a deposit of \$1st months rent and \$ of the tenancy term. If the deposit Landlord or his agent will assume the state of the	to be held as a is not received within	ne Landlord or his agent to be a rental deposit as prepaid in the two (2) day time frame	be used as follows: \$\frac{1}{2}\text{rent on account of the or other arrange}	he last month's rent
Upon acceptance by the Landlord standard form. In the event the app date of acceptance and before the ap of the applicant(s) hereunder and ur	licant(s) does not exe plicant(s) takes posse	ecute the said tenancy agree ession, the deposit paid shall	ement within fourte be subject to forfei	en (14) days from th t in whole an all right
It is understood that the following of	nly may occupy the r	rented premises:		
Name:	Age:	Name:		Age:
Name:	Age:	Name:		Age:
Name:	Age:	Name:		Age:
The Applicant(s) is advised to have against fire, theft and water damage  The Applicant(s) must advise the La	risk.		·	
PRIVACY: A federal privacy law assured that your personal informati			formation may be ı	used. Please rest
With respect to the above please not	e the following:			
Should this application be accep any other personal information property.				

Applications to be returned to: The Rental Lifestyle Group, 49 St. Clair Avenue West, Suite 101, Toronto, Ontario, 1116. Tel: 416.340-9676. Fax: 416 340-79011.

• If this application should not be accepted, it and any other personal information that you have provided to us will be returned to you upon your request or otherwise destroyed within ten days of our notification to you that the

application has not been accepted.

## PARTICULARS OF APPLICANT (1)

Applicant (1) Signature\_\_\_\_

Identifying Information	:					
Name						
Phone Number	Date of	Birth:		S.I.N		
Married	_Unmarried	Sharing				
Current Information						
Current Address			City		Province	Postal Code
	t this address:		City	•	. rormee	T obtain Coulc
	Rent			Other		
<u>-</u>	ame				Phone Nur	mber
n you rome Damaiora 5 1.0					7.110.110.110.11	
Past Information						
Previous Address			City	Pi	rovince	Postal Code
	nis address:		,			
	Rent		ents		Other	
	Kent		-110		Gaici	
<u></u>	s Name			Phone No	ımher	
you remed — Landiord s	, ivaille			_ i none int	et	
inancial Information						
urrent Employment: Full	TimePart Time	Retired	Stude	ent	Unemployed	
ame of Employer				Bus. Phone	:	
ccupation		Length	of Time		Salary Range	:
evious Employment: Fnll	l TimePart Time	Retired	Stude	entl	Jnemployed	
ame of Employer				_Bus. Phor	e	
cupation		Lengt	h of Time_		Salary Range_	
me of Bank		Branch Addı	ess			
one Number	Ac	count Type		_Account N	lo	
ther						
ar Particulars						
Make & Year	r	(	Colour	-	License No.	
river's License No						
eferences_						
Name		Address'			Phone No.	Relationship
Name		Address			Phone No.	Relationship
n Case of Emergency						
Nan	me			Relation	ship	Phone No
HE ABOVE INFORM	IATION IS STRICTLY	CONFIDENTIA	<u>AL</u>			
hereby authorize the Landonsent to it making enquir	dlord herein to obtain such f	acts and investigate to the disclosure	ate informate of any info	ion regardin	ng me it deems ne	cessary for its purposes and
	ries of others. I also consent person with whom the under ue and rt of this Agreement herein.	ersigned has or pi	roposes to h	ave financia	al relations. I here	by declare that the
	day of	20	1			
	_ ,		<del></del>			
ne Applicant covenants th	hat he/she is over the age of	18 years.				

## PARTICULARS OF APPLICANT (2)

Applicant (2) Signature\_\_

Identifying Information:			
Name			-
Phone Number	Date of Birth:	S.I.N	
MarriedUnmarried	Sharing		
Current Information			
Current Address Street	City	Province	Postal Code
How long have you lived at this address:	•	Trovince	1 ostat Couc
		Other	
Reason for moving	-		
If you rent — Landlord's Name			-
·			
Past Information			
Previous Address	City	Province	Postal Code
How long did you live at this address:			
Did you Own Rent	Live with parents	Other_	
Reason for moving	-		_
If you rented — Landlord's Name			
Financial Information	Ti Di I		
Current Employment: Full TimePart 7			
Name of Employer		_	
Occupation	_		
Previous Employment: Fnll TimePart T			
Name of Employer		<del></del>	
Occupation		-	
Name of Bank			
Phone Number	Account Type	Account No	
Other			
Car Particulars	Colour	License No.	
Driver's License No			
References	Address'	Phone No.	Relationship
<del></del>			
Name	Address	Phone No.	Relationship
In Case of Emergency Name		Relationship	Phone No
		-	
THE ABOVE INFORMATION IS STRIC	CTLY CONFIDENTIAL		
I hereby authorize the Landlord herein to obtai conse <sup>nt</sup> to it making enquiries of others. I also reporting agency of to any person with whom storegoing information is true and complete and will form part of this Agreement	consent to the disclosure of any in the undersigned has or proposes to	ation regarding me it deems necess formation concerning the undersig have financial relations. I hereby o	ary for its purposes and ned to any credit declare that the
Dated thisday of			
The Applicant covenants that he/she is over the			
**	- ·		