

Application for Residential Tenancy



Schinkel Properties Inc.
12H 40 North Gate Dr. Steinbach R5G 2T9 • PHONE: 204.326.2640

:: THE FOLLOWING INFORMATION IS STRICTLY CONFIDENTIAL ::

LOCATION: _____ REQUIRED MOVE-IN DATE: _____

PERSONAL INFORMATION OF APPLICANT		PERSONAL INFORMATION OF CO - APPLICANT	
APPLICANT'S NAME		CO-APPLICANT'S NAME	
DATE OF BIRTH (YYYY/MM/DD)		DATE OF BIRTH (YYYY/MM/DD)	
TELEPHONE		TELEPHONE	
DRIVER'S LICENSE NUMBER		DRIVER'S LICENSE NUMBER	
PRESENT ADDRESS		PRESENT ADDRESS	
PRESENT LANDLORD OR MANAGER	TELEPHONE	PRESENT LANDLORD OR MANAGER	TELEPHONE
RENT AMOUNT	HOW LONG?	RENT AMOUNT	HOW LONG?
REASON FOR LEAVING		REASON FOR LEAVING	
FORMER ADDRESS		FORMER ADDRESS	
FORMER LANDLORD OR MANAGER	TELEPHONE	FORMER LANDLORD OR MANAGER	TELEPHONE
FORMER RENT AMOUNT	HOW LONG?	FORMER RENT AMOUNT	HOW LONG?

LIST NAMES OF ALL PERSONS WHO WILL OCCUPY THE SUITE WITH YOU

_____ | _____ | _____ | _____

EMPLOYER, OR SOURCE AND LEVEL OF INCOME:
If you are employed, please list your employer: OR, if unemployed list your source of income. Use back of this page if additional space is required.

APPLICANT'S EMPLOYMENT HISTORY						
STATUS (please check one):	FULL TIME <input type="checkbox"/>	PART TIME <input type="checkbox"/>	STUDENT <input type="checkbox"/>	RETIRED <input type="checkbox"/>	UNEMPLOYED <input type="checkbox"/>	OTHER <input type="checkbox"/>
EMPLOYER	CURRENT		LENGTH OF EMPLOYMENT			
	PREVIOUS					
EMPLOYERS ADDRESS						
SUPERVISOR / CASEWORKER	PHONE	INCOME (AFTER TAX)	MONTHLY			
			BI-WEEKLY			

CO - APPLICANT'S EMPLOYMENT HISTORY						
STATUS (please check one):	FULL TIME <input type="checkbox"/>	PART TIME <input type="checkbox"/>	STUDENT <input type="checkbox"/>	RETIRED <input type="checkbox"/>	UNEMPLOYED <input type="checkbox"/>	OTHER <input type="checkbox"/>
EMPLOYER	CURRENT		LENGTH OF EMPLOYMENT			
	PREVIOUS					
EMPLOYERS ADDRESS						
SUPERVISOR / CASEWORKER	PHONE	INCOME (AFTER TAX)	MONTHLY			
			BI-WEEKLY			

OTHER INFORMATION		
NAME OF BANK	ADDRESS	PHONE
CAR (MAKE / MODEL)	YEAR / COLOR	LICENSE PLATE NUMBER
CAR (MAKE / MODEL)	YEAR / COLOR	LICENSE PLATE NUMBER

REFERENCES		
APPLICANTS REFERENCES [NAME & ADDRESS]	PHONE	RELATIONSHIP
APPLICANTS REFERENCES [NAME & ADDRESS]	PHONE	RELATIONSHIP
CO-APPLICANTS REFERENCES [NAME & ADDRESS]	PHONE	RELATIONSHIP
CO-APPLICANTS REFERENCES [NAME & ADDRESS]	PHONE	RELATIONSHIP

NAME OF PERSON TO CONTACT IN CASE OF EMERGENCY		
NAME & ADDRESS	PHONE	RELATIONSHIP
NAME & ADDRESS	PHONE	RELATIONSHIP

PETS			
YOUR RESIDENTIAL TENANCY AGREEMENT STATES IN SECTION 21 "THE TENANT WILL NOT KEEP OR ALLOW TO BE KEPT WITHIN OR ABOUT THE PREMISES, ANY DOG, CAT OR OTHER ANIMAL WITHOUT WRITTEN PERMISSION OF THE LANDLORD".			
BREED	CURRENT WEIGHT	FULL GROWN WEIGHT	DOG
			CAT

- Have you any unpaid judgments outstanding against you or your spouse at this time? YES NO
- Have you been evicted from, or asked to leave any previous accommodation in the last 7 years? YES NO
- Have you left any previous accommodation owing rent, utilities or damages? YES NO
- Have you been convicted of a Felony / Indictable Offence in the last 7 years? YES NO
- Have you declared bankruptcy in the last 7 years? YES NO

* If you wish to explain your responses to the above questions, please attach another sheet and return with this form

CARE OF CARPETS AND WINDOW COVERINGS ARE THE TENANTS RESPONSIBILITY AFTER MOVE IN

I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS REQUESTED IS CAUSE FOR REJECTION OF THIS APPLICATION OR TERMINATION OF MY LEASE.

CONSENT: I / We hereby declare that I am over the age of 18 and that the information in the above application and all attachments is true, complete and accurate to the best of my knowledge. I / We understand that any misrepresentation or omission of information is grounds for eviction. For the purposes of determining whether my/our application for tenancy is acceptable, I/we hereby consent Schinkel Properties Inc. to obtain personal information reports on me/us (including spouse) from one or more consumer reporting agencies or from other sources of such information. If asked, I/we are willing to obtain a criminal record check as part of the application. (If accepted, the cost of the criminal record check will be deducted from the first month's rent). I/we authorize the reporting agencies and other persons to disclose information on me/us to the landlord or landlord's authorized agent. I/we understand that this application is not a rental agreement and does not create any obligation on the Landlord or its agents. This application is the property of Schinkel Properties Inc. It will not be returned.

APPLICANT'S SIGNATURE: _____ DATE: _____

CO - APPLICANT'S SIGNATURE:

DATE:

FOR OFFICE USE ONLY

REFERENCE VERIFICATION

APPLICATION

DEPOSITS

- PRESENT ADDRESS *
- FORMER ADDRESS
- EMPLOYMENT *
- CO-APPLICANT

APPROVED

NOT APPROVED

* REQUIRED

DATE

INITIALS

DATE OF OCCUPANCY

DATE

AMOUNT