

RENTAL APPLICATION



849 HOMER STREET, VANCOUVER, BC V6B 2W2

Property Information

Suite #: Building Address: Date Occupancy Desired:

The Applicant agrees to pay the landlord a SECURITY DEPOSIT of \$.

Applicant's Information

First Name: Middle Initial: Last Name:

Date of Birth: Social Insurance Number:

Work Phone #: Home Phone #: Email:

Present Address: Rent: ☐ How Long?

City: Province: Postal Code: Own: ☐

Reason for Leaving: Monthly Rent: \$

Present Landlord's Name: Present Landlord's Phone #:

Previous Address: Rent: ☐ How Long?

City: Province: Postal Code: Own: ☐

Reason for Relocation: Monthly Rent: \$

Previous Landlord's Name: Previous Landlord's Phone #:

Applicant's Information

First Name: Middle Initial: Last Name:

Date of Birth: Social Insurance Number:

Work Phone #: Home Phone #: Email:

Present Address: Rent: ☐ How Long?

City: Province: Postal Code: Own: ☐

Reason for Leaving: Monthly Rent: \$

Present Landlord's Name: Present Landlord's Phone #:

Previous Address: Rent: ☐ How Long?

City: Province: Postal Code: Own: ☐

Reason for Relocation: Monthly Rent: \$

Previous Landlord's Name: Previous Landlord's Phone #:

Personal Information

In case of emergency, please notify:

Name: Phone #: Relationship:
Vehicle Make: Model: Colour: License #:
I/We own a pet(s): Yes ☐ No ☐ Describe:
I/We are smokers: Yes ☐ No ☐ Do you have renter's insurance? Yes ☐ No ☐

Financial Information

Which financial institution do you currently bank with?
Have you or any proposed occupant ever: ☐ Have you ever filed bankruptcy? Yes ☐ No ☐
Been convicted of a felony? Yes ☐ No ☐ Describe:
Been evicted from a rental? Yes ☐ No ☐ Describe:

Employment Information

Current Employer (if self-employed, name of business):
Business Address: Position:
City: Province: Postal Code: From: To:
Work Phone #: Work Email: Monthly Income: \$
Supervisor's Name: Supervisor's Phone #:

Prior Employer (if self-employed, name of business):
Business Address: Position:
City: Province: Postal Code: From: To:
Supervisor's Name: Supervisor's Phone #: Monthly Income: \$
Other Monthly Income: \$

Employment Information

Current Employer (if self-employed, name of business):
Business Address: Position:
City: Province: Postal Code: From: To:
Work Phone #: Work Email: Monthly Income: \$
Supervisor's Name: Supervisor's Phone #:

Prior Employer (if self-employed, name of business):
Business Address: Position:
City: Province: Postal Code: From: To:
Supervisor's Name: Supervisor's Phone #: Monthly Income: \$
Other Monthly Income: \$

All Other Proposed Occupants (including infants & children)

First Name:	Middle Initial:	Last Name:
Date of Birth: <input type="text"/>	Social Insurance Number: <input type="text"/>	
Work Phone #:	Home Phone #:	Email:
Present Address:	Rent:	How Long?
City:	Province:	Postal Code:
Reason for Leaving:	Own:	Monthly Rent: \$
Present Landlord's Name:	Present Landlord's Phone #:	
Previous Address: <input type="text"/>	Rent: <input type="text"/>	How Long? <input type="text"/>
City: <input type="text"/>	Province: <input type="text"/>	Postal Code: <input type="text"/>
Reason for Relocation: <input type="text"/>	Own: <input type="text"/>	Monthly Rent: \$ <input type="text"/>
Previous Landlord's Name: <input type="text"/>	Previous Landlord's Phone #: <input type="text"/>	
First Name: <input type="text"/>	Last Name: <input type="text"/>	Age: <input type="text"/>
First Name: <input type="text"/>	Last Name: <input type="text"/>	Age: <input type="text"/>

Consent to Verification of Credit and Other Information

I/We warrant, to the best of my/our knowledge, all of the information provided in this Application is true, accurate, complete and correct as of the date of this Application. If any information provided by me/us is determined to be false, such false statement will be grounds for disapproval of my/our Application or termination of my/our Lease with Owner.

I/We understand and agree:

- (i) this is an application to rent only and does not guarantee that I/We will be offered the Property, and
- (ii) Landlord or Manager or Agent may accept more than one application for the Property and, using their sole discretion, will select the best qualified applicant.

I/We hereby authorize the Landlord or Manager or Agent to verify the information provided and obtain a credit report on me/us.

Applicant's Signature: _____ Date:

Co-Applicant's Signature: _____ Date: