

## Application for Tenancy Turret Management Inc. the Lessor

FOR OFFICE PURPOSE ONLY	
Occupancy Date: dd/mm/yyyy)	LMR\$ FMR \$
Unit No Address	Monthly Rental \$
Lease Start Date (dd/mm/yyyy)	Lease End Date (dd/mm/yyyy)
Tenant To Pay: ✓ Hydro ☐ Gas ✓ Hot Water Tank Rental ✓ Monthly Water Consumption Above 27 Cubic Meters	
Additional parking (\$41.00 / month) Yes  No	Refrigerator Yes □ No □ Stove Yes □ No □
Applicant #1	Applicant #2
Name_	Name
Tel # Cell #	Tel # Cell #
Date of Birth (dd/mm/yyyy)	Date of Birth (dd/mm/yyyy)
Present Address_	Present Address
City Postal Code	City Postal Code
Email	Email
Present Landlord_	Present Landlord
Present Landlord Phone #	Present Landlord Phone #
Reason for Leaving	Reason for Leaving
How Long at Present Address	How Long at Present Address
Reference Name	Reference Name
Reference Phone No.	Reference Phone No
Names of Children & Ages	

If Less Than 2 Years at Current Address	If Less Than 2 Years at Current Address
Previous Address	Previous Address
CityPostal Code	CityPostal Code
Previous Landlord	Previous Landlord
Previous Landlord Phone #	Previous Landlord Phone #
Employment History	Employment History
Present Employer	Present Employer
Occupation	Occupation
How Long	How Long
Tel #	Tel #
Other Source of Income	Other Source of Income
Annual Income \$	Annual Income \$
If Less Than 2 Years	If Less Than 2 Years
Previous Employer	Previous Employer
Occupation	Occupation
How Long Tel #	How Long Tel #
The undersigned agrees that usual tenant and credit inquires may be made at anytime in connection with the application hereby applied for and consents to the disclosure of such information to any person or to any credit reporting agency with whom the undersigned has or may have financial relations. This application is to be binding upon the Tenant for a period of fourteen (14) days from the date hereof, during which time this application shall be open for acceptance, be or on behalf of the Landlord; deposit to be returned to the Tenant only if this application is not accepted by the Landlord within the aforementioned time. Upon acceptance of this Application, the Landlord shall retain the deposit as Liquidation Damages if the Tenant fails to occupy the tenancy and abide by the terms of the lease.  No pets without the written permission of the Landlord  No satellite dishes allowed	
We certify the information provided is complete and accurate.	
Signature	Signature
Date (dd/mm/yyyy)	Date (dd/mm/yyyy)
Accepted at this office by	Date (dd/mm/yyyy)