

## Application for Rental Accommodation (Ontario)

### Aldokken Property Management (APM)

Please Direct Any Questions to Aldokken Property Management 905-581-1915

Once completed in full, fax to 1-866-525-8383 or email [info@aldokken.ca](mailto:info@aldokken.ca)

*The Landlord Acknowledges the Confidentiality of This Document*

#### 1. ACCOMMODATION INFORMATION:

Date of Application: \_\_\_\_\_

Property Address: \_\_\_\_\_

Type Requested:  1 bedroom     2 bedroom     3 bedroom     Full house     Upper  Lower

Date Required: Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

Names of applicants to occupy premise:

Adults: \_\_\_\_\_

Children: \_\_\_\_\_

#### 2. PERSONAL INFORMATION OF APPLICANTS:

##### (1<sup>st</sup> Adult)

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Last Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

How Long: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_

# Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_

How Long: \_\_\_\_\_

Postal Code: \_\_\_\_\_

SIN #: \_\_\_\_\_ (optional)

Driver License # & Prov: \_\_\_\_\_

Do you smoke? \_\_\_\_\_

##### (2<sup>nd</sup> Adult)

First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Birth Date: \_\_\_\_\_

Last Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

How Long: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_

# Cell: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Email: \_\_\_\_\_

City: \_\_\_\_\_ Prov: \_\_\_\_\_

Postal Code: \_\_\_\_\_

SIN #: \_\_\_\_\_ (optional)

Driver License # & Prov.: \_\_\_\_\_

Do you smoke? \_\_\_\_\_

Do you have pets? If so, what type and how many? \_\_\_\_\_

Why are you moving from your current home? \_\_\_\_\_

How long do you want to rent this property? \_\_\_\_\_

**Additional Details:** \_\_\_\_\_

Initials \_\_\_\_\_

**3. EMPLOYMENT INFORMATION OF APPLICANTS:**

**(1<sup>st</sup> Adult)**

Current Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Supervisor: \_\_\_\_\_

How long: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Supervisor: \_\_\_\_\_

How long: \_\_\_\_\_

Address: \_\_\_\_\_

Phone#: \_\_\_\_\_

**(2<sup>nd</sup> Adult)**

Current Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Supervisor: \_\_\_\_\_

How long: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

Supervisor: \_\_\_\_\_

How long: \_\_\_\_\_

Address: \_\_\_\_\_

Phone#: \_\_\_\_\_

**Additional Details:** \_\_\_\_\_

**4. CREDIT INFORMATION OF APPLICANTS:**

LANDLORD OR AGENT may obtain credit information about me now or at any time from any credit bureau, my employer or any person in connection with any of my dealings with you and you may disclose (automatically or upon request) credit information about me to a credit bureau, and to persons with whom I have to propose to have financial dealings or if you believe disclosure is required by law and I verify that all statements on the application are true and I authorize verification of all references given.

**(1<sup>st</sup> Adult)**

Income: \_\_\_\_\_ per month

Bank: \_\_\_\_\_

Branch: \_\_\_\_\_

**Credit references:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**(2<sup>nd</sup> Adult)**

Income: \_\_\_\_\_ per month

Bank: \_\_\_\_\_

Branch: \_\_\_\_\_

**Credit references:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**Provide Additional Details on Separate Sheet**

**5. RENTAL HISTORY:**

**(1<sup>st</sup> Adult)**

Current Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

Current Monthly Rent: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

**(2<sup>nd</sup> Adult)**

Current Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

Current Monthly Rent: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_

Phone: \_\_\_\_\_

Initials \_\_\_\_\_

6. **RELATIVES OR FRIENDS WHO CAN BE CONTACTED IN CASE OF EMERGENCY:**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Relationship: \_\_\_\_\_

Relationship: \_\_\_\_\_

Along with this application please provide:

- photocopy of each applicants valid driver's license
- copies of most recent 2 paystubs
- letter of employment from each applicants current employer

If any of the above cannot be provided please state reasons in the "Additional Notes" section below.

APM may request additional documentation upon consideration of tenancy.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

*Approval of this application is subject to the Landlord and Tenant signing a Residential Tenancy Agreement.*

*Additional Details of Applicant Provided on Attached Sheet*

**All statements that I have made in this application are true. I authorize the Landlord to do a credit check and criminal background check.** By signing this application, **ALL** personal information is **consensually given** for use by us or our appointed agents in respect to your application, subsequent tenancy, or on- file records in accordance to The Personal Information Protection and Electronic Documents Act (PIPEDA 2004). This is to include and extend to the gathering and consent to access of account information and status for ALL utility companies that the Tenant may enter into contracts with for the duration and for periods after the termination of the tenancy to ensure accounts are in good and current standing during and at the completion of the lease period.

\_\_\_\_\_  
Signature of 1st Applicant

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of 2nd Applicant

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

## ***Additional Notes***

Initials \_\_\_\_\_