## MARGARET SCHIKETANZ REAL ESTATE INC.

189 King Street East, Kitchener, Ontario, Canada N2G 2K8 Phone: (519) 742-4477 Fax: (519) 742-8823

## **APPLICATION FOR TENANCY**

BEDROOM APARTMENTO	AT NT, FOR A TERM OF 12 MONT 	ΓHS, FROM	, 11 221 (6 1
TO	·		
MONTHLY RENTAL, PAYABLE	IN ADVANCE ON THE FIRST D	AY OF THE MONTH	I IS AS FOLLOWS:
For the period commencing <b>4:00</b>	<b>P.M.</b> on	and ending	
monthly rent shall consist of:			
	\$	Base Rent	AIR CONDITIONING =
	\$	Inside Parking	\$/SEASON
	\$		PER A/C UNIT
	\$Ea.	Addn'l Outside Pa	
	\$	Freezer	9
	•	TOTAL	
	Φ	IOIAL	
DEDOGET AA		0.1	
	ble by Certified Cheque or Mone  2 pieces of ID per applicant alor		
	tenant insurance must be suppl		
	•	1	3
APPLICANT #1			
	DIDTUDATE		
	BIRTHDATE:		
PREVIOUS ADDRESS: (incl. postal of		LANDLORD S F.	HONE.
	EMPLOYER:EMPLOYED HOW LONG:		
	ANNUAL INCOME:		
	BANK BRANCH:		
Email			
APPLICANT #2			
		HOME P	HONE:
	BIRTHDATE:		
PREVIOUS ADDRESS: (incl. postal c	ode)		
OCCUPATION:	EMPLOYER:		
BUSINESS PHONE:	EMPLOYED HOW LONG:		
S.I.N.#:(Optional)	ANNUAL INC	ANNUAL INCOME:	
BANK:	BANK BRANC	H:	

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<u>REFERENCES:</u>	1. NAME:	PHONE:	
	ADDRESS:		
	2. NAME:	PHONE:	
	ADDRECC.		
IN CASE OF EMER	GENCY, PERSON TO CONTA	ACT:	
	NAME:	PHONE:	
AUTOMOBILES:	1. MAKE AND MODEL: LICENCE PLATE NO.:	YEAR:COLOUR:	
	2. MAKE AND MODEL:	YEAR:	
	LICENCE PLATE NO.:	YEAR: COLOUR:	
DEPOSIT PAID:	\$ □ CI	ERTIFIED CHEQUE	
It is mutually agreed th	nat:		
Tenancy Agreement in submitted herewith should be such TENANCY	ncorporating the above terms into all be applied towards the <b>LAST</b> r	al Application by the landlord, we shall forthwith enter into a the Landlord's usual form, in which event the Contract Deposit month's occupancy. IF I/WE SHOULD FAIL TO ENTER INTO PTANCE - FOR ANY REASON - I/WE AGREE AND SHALL BE FORFEITED.	
2. There are NO	WATERBEDS permitted on the pr	remises.	
3. There are NO	There are NO PETS allowed on the premises. I/We acknowledge I/we do not have a dog(s).		
4. There is NO S	MOKING allowed in the confines	of the building. I/We acknowledge thisX	
which time this Appli Tenant only if this Appli landlord is not required	cation shall be open for acceptance oplication is not accepted by the	icant for a period of seven (7) days from the date hereof, during the by or on behalf of the Landlord; deposit to be returned to the Landlord within the aforementioned time. I understand that the excepting my application. Upon acceptance, this Application shall need hereto.	
		contact information to Rogers Cable. I understand that a Rogers ranging the installation of Rogers Communications products.	
any time in connection extension thereof. Per records, credit informatisclosure of any such	n with the undersigned, in conjunt sonal information may include button, social insurance number, em	uch personal information as the Landlord may deem necessary at ction with the premises hereby applied for, and any renewal or ut is not limited to name, address, telephone number, payment aployment verification, etc. The undersigned also consents to the signed to any credit reporting agency or to any person with whom as.	
DATED this	day of	_, 2021.	
		(Signature)	
		(Signature)	
FOR OFFICE USE O	ONLY:		