

CONFIDENTIAL APPLICATION FOR TENANCY Agency Disclosure Statement

Main Contact Person:

(Please insert name of main applicant in charge of securing rental) Note: Separate applications must be completed by ALL persons above the age of 18 applying to reside together (limit 3 unrelated adults). Unit(s) of Interest:

Application (today's) date:

Insert Booking IDs or Web Reference #s from Advertisement (max. 5)

- APPLICATION WILL	BE DISCARDED IF	NOT COMPLETED IN FULL -

ALL FIELDS ARE MANDITORY UNLESS STATED OTHERWISE

Name:
Phone:
(home) (work) (cell) Do you Smoke? Yes No I am: A Canadian Citizen or Permanent Resident Here on a Work Visa* Here on a Holiday Visa Have you or anyone looking to reside in the unit been convicted of a criminal offense: YES NO Would you be willing to supply a criminal record check (If required): YES NO Email:
Have you or anyone looking to reside in the unit been convicted of a criminal offense: YES NO Would you be willing to supply a criminal record check (If required): YES NO Email:
Would you be willing to supply a criminal record check (If required): YES NO Email:
Email: SIN:** emergency/Alternate Contact: Phone: *Applicants must provide a copy of their Working Visa with their application ** **BE ADVISED: Not providing a SIN does not exempt you from a credit check. SIN is used to distinguish individuals in instances where a search returns multiple persons with same name & same birthday. CURRENT RESIDENCE: OWNED THIS HOME FOR: YEAR (street) (city/town) (province/state) (postal code) Monthly Payment: \$ Monthly Payment: \$
Emergency/Alternate Contact: optional - used for credit check * Applicants must provide a copy of their Working Visa with their application **BE ADVISED: Not providing a SIN does not exempt you from a credit check. SIN is used to distinguish individuals in instances where a search returns multiple persons with same name & same birthday. CURRENT RESIDENCE: Address: OWNED THIS HOME FOR: YEAR (street) (city/town) (province/state) (postal code) Monthly Payment: \$ Monthly Payment: \$
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**BE ADVISED: Not providing a SIN does not exempt you from a credit check. SIN is used to distinguish individuals in instances where a search returns multiple persons with same name & same birthday. CURRENT RESIDENCE: Address: (street) (city/town) (province/state) (postal code) (street) (city/town) (province/state) (postal code) I AM A TENANT AT THIS ADDRESS (complete information below)
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I AM A TENANT AT THIS ADDRESS (complete information below)
I AM A TENANT AT THIS ADDRESS (complete information below)
Current Landlord Name: Phone:
Email:
Length of Tenancy:yrsmos Monthly Rent \$ Utilities Included? Yes No
Reason for Leaving: Tenancy Date: To(MM/DD/YYYY): From(MM/DD/YYYY):
PREVIOUS RESIDENCE:
Address: OWNED THIS HOME FOR: YEA
Monthly Payment: \$
I WAS A TENANT AT THIS ADDRESS (complete information below)
Previous Landlord Name: Phone: Phone:
Email:
Length of Tenancy: yrsmos Monthly Rent \$ Utilities Included? Yes No
Reason for Leaving: Tenancy Date: To(MM/DD/YYYY): From(MM/DD/YYYY):
PETS: Type Breed Age Weight
PETS: Type Breed Age Weight □ I have pet(s): complete information about your pet(s) ⇒



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EMPLOYMENT:	I AM SELF-EMPLOYED (proof of income will be required)						
Company:			Your Title:				
Contact person:		Title:	Phone:				
Length of Employment:	yrsmos		Salary: \$	Per Mth/Yr			
Previous Employer:			Phone:				
(if current employer less than 3 years)							
ADDITIONAL SOURCE	E(S) OF INCOME:	Earned Per Month	YOUR GROSS TOTAL MONT	THLY INCOME:			
1		\$ \$	ć				
2.		\$	Ş				
RENTAL REQUIREME	NTS: Rental Required:	Immediately	(or) Date:				
Number Bedrooms Required: UNFURNISHED (w/specified appliances) Preferred Lease Term (6 mth min.): FURNISHED							
Rental Preferences:	House Apartment (condo)	Townhouse (condo)	Upper/Lower Suite	No Pref.			
Rent: \$ to \$ Location:							
(minimum) (maximum) (preferred area of town)							
Planning roommates or additional occupants over the age of 18? Yes No Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates or additional occupants over the age of 18? Planning roommates over the age of 18? Planning roommates over the age of 18? Planning room over the age over the age over the age over the ag							
Please list ALL intended unit occupants (including minors & family members) in the space below:							
1. Name:	Age	· · · · ·					
2. Name:	Age	·					
3. Name:	Age	: Relationship:					
Any additional info you would like us to know:							

I ACKNOWLEDGE, AGREE AND CONSENT TO THE FOLLOWING:

- The information I have provided will be used to assess my suitability as a PEKA Tenant, including but not limited to: credit check, criminal record check (if applicable), previous landlord references, employment verification and confirmation of income. In the event this application is not approved, PEKA is under no obligation to disclose the reason(s) for denying the same.
- I will be additionally required to provide personal identification (minimum 2 pieces / 1 photo) when I enter into a Lease (if applicable).
- The application information I have provided may be disclosed to a third party at the sole discretion of PEKA, including but not limited to an agency or agencies acting on behalf of PEKA or the Owner in the pursuit of delinquent funds.
- ✓ All PEKA rental units are "NO SMOKING" and "NO PETS" (unless pet approved by owner/condominium).
- ✓ PEKA will only contact those applicants which have been approved and for whom we are able to offer rental(s) that meet their listed requirements.
- This application will be confidentially maintained on file with PEKA. If no lease is executed as a result of this application, it will be confidentially destroyed at the expiry of three (3) months from the date of the application. If a lease is entered into, this application will remain on file for the period required by RECA.
- I hereby certify that all statements made in this application are true and grant PEKA permission to contact any/all persons listed above for any purpose they see fit and in keeping with the rental application process. I will instruct all persons listed herein to release applicable information to PEKA and my failure to do so may delay or hinder my application approval.

AGENCY DISCLOSURE:

Pursuant to the Real Estate Act of Alberta, PEKA Professional Property Management Ltd. ("PEKA") is required to notify you that **PEKA is the agent of the Property Owner ("Owner").** PEKA is therefore obligated: to be loyal to the Owner and always act in the best interests of the Owner; not to provide information or advice to you as applicant that is not in the best interests of the Owner, and; to communicate to the Owner all information, whether or not of a confidential nature, that it receives from you as applicant. THERE IS NO CHARGE FOR THIS APPLICATION. PEKA's Privacy Policy is available at our website: www.peka.ca

CICALLIEDE.	
SIGN HERE:	
JIGHT ILKL.	

(type in name in lieu of signature)

DATE: