



Licensed Property Management Services

TENANCY APPLICATION FORM

1. Personal Details

Applicant#1

First Name: _____ **Last Name:** _____ **Initial:** _____
(as appears on your Driver License or Passport)

Date of Birth: ____ / ____ / ____ **Sex:** Male / Female

MM DD YYYY

Driver License Number: _____ **State of Issue:** _____

Alternate ID Number: _____ **Type:** _____

Current Address:

Unit: _____ **Street Number:** _____

City: _____ **Province:** ____ **Postal Code:** _____

Contacts:

Home Phone: (____) ____ - ____ **Cell Phone:** (____) ____ - ____

E-mail: _____

Occupation: _____





Licensed Property Management Services

Applicant#2

First Name: _____ **Last Name:** _____ **Initial:** _____
(as appears on your Driver License or Passport)

Date of Birth: ____ / ____ / _____ **Sex:** Male / Female

MM DD YYYY

Driver License Number: _____ **State of Issue:** _____

Alternate ID Number: _____ **Type:** _____

Current Address:

Unit: _____ **Street Number:** _____

City: _____ **Province:** _____ **Postal Code:** _____

Contacts:

Home Phone: (____) ____ - _____ **Cell Phone:** (____) ____ - _____

E-mail: _____

Occupation: _____

2. Property Applying For

Address:

Unit: ___ Number: _____

City: _____ Province: _____ Postal Code: _____

Lease Term: ___ Year(s) ___ Month(s)

Date Property to Be Occupied: ___ / ___ / ___
MM DD YYYY

Rental Amount: \$ _____ Per Month or \$ _____ Per Year

Name(s) of other Applicants:

1- _____

2- _____

3- _____

4- _____

No. of Person Occupying: ___ Adult(s) ___ Children

Ages of Children (if applicable): _____

3. Current Tenancy Details

How long have you lived at your current address? ___ Year(s) ___ Month(s)

Name of Landlord/Agent (if applicable): _____

Landlord/Agent Phone Number: (___) ___ - _____

Rent Paid Per Month: \$ _____

Reasons for Leaving: _____

4. Previous Rental History

Previous Address:

Unit: _____ Street Number: _____

City: _____ Province: _____ Postal Code: _____

How long have you lived at your previous address? ____ Year(s) ____ Month(s)

Name of Landlord/Managing Agent/Realtor: _____

Landlord/Managing Agent/Realtor Ph Number: (____) ____ - _____

Rent Paid Per Month: \$ _____

Reasons for Leaving: _____

5. Current Employment Details

Applicant #1

Occupation: _____

Employer's Name: _____

Employment Address:

Unit: _____ Street Number: _____

City: _____ Province: _____ Postal Code: _____

Employer Phone Number: (____) ____ - _____

Contact Name (e.g. Manager / Supervisor): _____

Length at current employment: ____ Year(s) ____ Month(s)

Monthly Salary: \$ _____ or **Yearly Income:** \$ _____

Other Income (please specify): _____

Applicant #2

Occupation: _____

Employer's Name: _____

Employment Address:

Unit: _____ Street Number: _____

City: _____ Province: _____ Postal Code: _____

Employer Phone Number: (____) ____ - _____

Contact Name (e.g. Manager / Supervisor): _____

Length at current employment: ____ Year(s) ____ Month(s)

Monthly Salary: \$ _____ or Yearly Income: \$ _____

Other Income (please specify): _____

6. Previous Employment Details*

Applicant #1

* if the current length of employment is less than two (2) years

Occupation: _____

Employer's Name: _____

Employment Address:

Unit: _____ Street Number: _____

City: _____ Province: _____ Postal Code: _____

Employer Phone Number: (____) ____ - _____

Contact Name (e.g. Manager / Supervisor): _____

Length at current employment: ____ Year(s) ____ Month(s)

Monthly Salary: \$ _____ or Yearly Income: \$ _____

Applicant #2

* if the current length of employment is less than two (2) years

Occupation: _____

Employer's Name: _____

Employment Address:

Unit: _____ Street Number: _____

City: _____ Province: _____ Postal Code: _____

Employer Phone Number: (____) ____ - _____

Contact Name (e.g. Manager / Supervisor): _____

Length at current employment: ____ Year(s) ____ Month(s)

Monthly Salary: \$ _____ or Yearly Income: \$ _____

7. If you have pet, please complete the following

Age: _____ Breed: _____

Size: _____

Is your pet house trained? Yes / No

8. Personal References

First Reference:

Name: _____ Occupation: _____

Relationship: _____ Phone Number: (____) ____ - _____

Second Reference:

Name: _____ Occupation: _____

Relationship: _____ Phone Number: (____) ____ - _____

9. Collection Statement

We collect your personal information for the purpose of assessing the risk of providing you with the tenancy, processing your tenancy application, preparing the lease or tenancy agreement, collecting rental payments and other purposes related to the management of your tenancy.

Your personal information will not be disclosed to other people or to external organizations. However, if necessary, we may disclose personal information about you to:

- the property owner, its lawyers and contractors;
- tenancy tribunals and courts;
- service providers for repairing/maintaining the property.
- if you consent to us doing so;

10. Declaration

I acknowledge that this is an application to lease this property and that my application is subject to the owner's approval and the availability of the premises on the due date. No action will be taken against the owner or agent if the application is unsuccessful or upon acceptance should the premises be unavailable for occupation on the date for whatever reason. I hereby offer to rent the property from the owner under a lease to be prepared by the Agent pursuant to the Residential Tenancy Act.

I declare that all information contained in this application is true and correct to the best of my knowledge and given of my own free will. I declare that I have inspected the property and am satisfied that the premises are in neat and clean condition, and that I am not bankrupt.

I hereby authorize the agent to whom this application is submitted to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement. This consent is given pursuant to Chapter 78, Section 12, of the Credit Reporting Act, R.S.B.C. 1979.

Date: ____ / ____ / ____
MM DD YYYY

Applicant Signature: _____ Witness Signature: x _____

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