



RENTAL APPLICATION & OFFER TO LEASE

1. PREMISES APPLIED FOR:

Suite No. _____ Type of Suite _____ Building Name STATESMAN APTS.
Address: 145 STEWART STREET, OTTAWA, ONTARIO K1N 6J4

Parking privileges required YES NO for _____ private passenger automobiles
Outside Inside Carport Garage Other

OCCUPANCY TERM TO COMMENCE _____ 20____
OCCUPANCY TERM TO END _____ 20____

2. RENT PAYMENTS:

Monthly Basic Rent ⁽⁴⁾ \$ _____
Parking: Outside \$ _____
 Inside \$ _____

Total Monthly Rent \$ _____ Payable in advance on the 1st of each month

⁽⁴⁾ Parking is not included in the Basic Rent

I agree to pay directly for the following services to the desired premises:

Electricity Gas Heat Hot Water Heater _____ _____

3. DEPOSIT DETAILS:

First month's deposit \$ _____ Money Order Cert. Cheque _____ 20____
Last month's deposit \$ _____ Money Order Cert. Cheque _____ 20____
Total Deposit Paid \$ _____

4. NOTE:

- If the application is not accepted, the deposit will be returned in full.
- If the application is accepted and if for any reason the applicants do not take the premises, the deposit is automatically forfeited in addition to any other rights accruing to the Landlord.

5. GENERAL:

- Upon acceptance by the landlord, this "Offer to Lease" constitutes a binding and enforceable agreement to lease the premises. The applicant(s) agree to enter into the Landlord's usual form of Tenancy Agreement, prior to occupancy.
- The Applicant grants his consent for a consumer report credit and investigation of personal information in connection with this application.
- The Applicant grants consent for the release of current/previous employment and landlord information.
- The Applicant is advised to have insurance coverage for liability and insurance on his personal belongings.

Initials

Initials

NO PETS ALLOWED/WATER BEDS STRICTLY PROHIBITED

DATED THIS _____ DAY OF _____ 20____

Applicant Name (Please print) / Applicant Signature

Applicant Name (Please print) / Applicant Signature

ACCEPTED THIS _____ DAY OF _____ 20____

Agent for Landlord

NAME	Last:	Last:
PRESENT ADDRESS	First: Apt. No.: Street (#/Name): City: Postal Code:	First: Apt. No.: Street (#/Name): City: Postal Code:
HOME PHONE NO.		
SOCIAL INSURANCE NO.		
DATE OF BIRTH (D/M/YR)		
CURRENT LANDLORD'S NAME		
LANDLORD'S PHONE		
PREVIOUS ADDRESS		
PREVIOUS LANDLORD		
ANNUAL INCOME		
EMPLOYER'S NAME		
EMPLOYER'S PHONE		
LENGTH OF EMPLOYMENT		
OCCUPATION		
PREVIOUS EMPLOYER		
LENGTH OF EMPLOYMENT		
NAME OF BANK	Branch: Acct #:	Branch: Acct #:
MAKE OF AUTO	Plate #:	Plate #:
REFERENCES	Name: Address: Tel. #:	Name: Address: Tel. #:
REFERENCES	Name: Address: Tel. #:	Name: Address: Tel. #:
EMERGENCY CONTACT	Name: Address: Tel. #: Relationship:	Name: Address: Tel. #: Relationship:
OTHER OCCUPANTS (Including Children)	Name: Name: Age: Age:	Name: Name: Age: Age:

SOURCE OF AVAILABILITY:

- Ad/Citizen Building Sign Referred by a Tenant
 Other _____ Referred by a Non-Tenant

OFFICE USE ONLY

LANDLORD _____

EMPLOYMENT _____

CREDIT _____

MISC. _____