Genesis Property Management Group Inc.

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- ☐ APPROVED
- ☐ DECLINED
- ☐ KEPT ON FILE

RESIDENTIAL RENTAL APPLICATION

One application for each adult Tenant is required.

Property Applying for:_____

1. Applicant: Name: _____
Phone #:_____ Email:_____
Date of Birth: _____S.I.N_____ Drivers License #:_____
Present Address:_____
Present Rent: _____Security Deposit: _____Pd by: _____
Present Landlord/Agency: _____
Landlord/Agency Contact Name: _____
Landlord/Agency Contact Phone #: _____
How Long at Present Address: _____Reason for Leaving Present Address:_____
_____

2. Other Occupants:
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Name: _____ Age: _____ Relationship: _____
Persons other than those indicated on application will not be permitted occupancy. Termination of tenancy or additional charges shall result if unauthorized persons who take up occupancy.

3. Present Employer: _____
Address of Employer: _____
Occupation: _____
Duration of Employment: _____ Contact Name: _____
Employer Contact Phone #: _____
Other Sources of Income/Pension: _____ Case #: _____
Case Worker Name: _____
Case Worker Phone #: _____
Monthly NET Income: _____ Name of Bank/CU: _____
Branch Address: _____

4. Description of vehicles used by occupants
Make/Model: _____ Colour: _____ License #: _____
Make/Model: _____ Colour: _____ License #: _____
Number of Parking Stalls Required: _____
Unlicensed, uninsured or inoperable vehicles are not permitted on property and will be towed at owner's expense.

5. Do you have a pet? _____ If so, how many? _____ Type of pet: **Cat / Dog**
Breed(s): _____ Weight(s): _____
Name(s): _____ **Is this pet a service animal?** Yes / No
A Pet Deposit will be required. Most rentals have weight restrictions. Please confirm with the property manager.

6. In case of emergency contact:
Name: _____Phone #:_____
Address: _____
Relationship: _____Email:_____

7. Guarantor if Required:

Name:_____Phone#:_____
Address: _____
Phone: _____Email:_____
Date of Birth: _____ S.I.N._____
Present Employer: _____
Occupation: _____
Duration of Employment: _____ Contact Name: _____
Employer Contact Phone #: _____
Monthly NET Income: _____ Name of Bank/CU: _____
Branch Address: _____
Guarantor will be required to complete a credit check information form and consent form.

I hereby certify the above information to be correct, and consent to the undertaking of a personal credit investigation, Landlord check and Employment check. All personal information will be treated in accordance with the Privacy Legislation Bill (Bill C6- The Personal Information Protection & Electronics Documents Act (PIPEDA).

I understand that should the application be accepted, I shall sign a tenancy Agreement.

Applicant Signature: _____**Date**: _____
Guarantor Signature: _____ **Date**: _____

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How did you hear about this rental unit?

Kijiji: ☐ Facebook: ☐ Instagram: ☐ Genesis Website: ☐ Other: _____

Were you referred by anyone?

Name: _____ Email: _____

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Rent:_____ Security: _____ Pd date: _____ Pd Method: _____
Processing date on cheque, should one be provided as deposit:_____
Lease from (date): _____ to (date): _____
Parking: Number of stalls ____ at $_____/stall
Parking: Number of stalls ____ at $_____/stall
Total Monthly Payable: _____
Landlord Authorization: _____ Approval Date:_____
Tenants notified by: _____ Date: _____

Tenant Responsible for:	HYDRO *YES/NO*	WATER *YES/NO*	GAS *YES/NO*
Separate Meter (S/M)	S/M *YES/NO*	S/M *YES/NO*	S/M *YES/NO*
	Snow Removal *YES/NO*		Grass Cutting *YES/NO*
	Cable TV *YES/NO*		Phone *YES/NO*

COMMENTS:_____
_____
_____
_____

Application received by:_____date:_____

All applications and credit checks will be processed as soon as we receive them. It takes 1-3 business days to complete. We will email you if you are either approved or declined. If you have any questions, please email our office manager, Jennifer Betsill, directly at jennifer@genesismanagement.ca.