



APPLICATION TO RENT FIRSTSERVICE RESIDENTIAL

A. OFFER. I/We the undersigned, herein also known as the applicant, hereby offer(s) to rent from _____ ("Landlord") the premises described as: _____

Suite No. _____ Type _____ Building address _____

B. At a monthly rent of \$ _____; Plus parking \$ _____; Total \$ _____. Date occupancy desired _____

Landlord's agent: **FirstService Residential Suite 700, 200 Granville St., Vancouver, B.C. V6C 1S4**, and if accepted, will enter the standard tenancy agreement shown to me/us, which I/we have had an opportunity to examine. This offer is subject to acceptance by the Landlord and is open for acceptance for FIVE business days ending at 6 p.m., following the date herein, or until _____ 20_____ and includes a security deposit of \$ _____ for which receipt is attached. If this offer is not accepted, the deposit shall be refunded. If the applicant fails to enter, or proceed with, the tenancy agreement after the offer is accepted, the applicant shall be held liable for payment of the equivalent of one month's rent to the landlord as liquidated damages for failure to complete the agreement. The agent may release the security deposit to the Landlord (who may hold it in his general account until tenancy terminates), Rent is payable promptly in advance by first of the month.

C. Names of all **other adult** persons (age 19 or older) to occupy the premises. Include given names for each one.

Names of **minor** tenants (under age 19, including infants). Include names of each and every minor to occupy the premises and their ages.

D. **INFORMATION re adult applicants**, to be completed in full for each one. Print clearly.

Management reserves the right to refuse to consider this application unless all questions contained herein are answered completely.

	Primary Applicant	Co-Applicants
• NAME:	_____	_____
• BIRTHDATE:	_____	_____
• SOCIAL INS NO.:	_____	_____
• HOME PHONE:	_____	_____
• WORK PHONE:	_____	_____
• EMAIL ADDRESS:	_____	_____
• PRESENT ADDRESS:	_____	_____
• (Including postal code)	_____	_____
• PRESENT LANDLORD'S NAME:	_____	_____
• PRESENT LANDLORD'S PHONE:	_____	_____

- LENGTH OF STAY: _____
- REASON FOR LEAVING: _____
- PREVIOUS ADDRESS: _____
- PREVIOUS LANDLORD'S NAME: _____
- PREVIOUS LANDLORD'S PHONE: _____
- LENGTH OF STAY: _____
- REASON FOR LEAVING: _____
- OCCUPATION _____
- MONTHLY INCOME: _____
- LENGTH OF EMPLOYMENT: _____
- EMPLOYER'S NAME: _____
- EMPLOYER'S ADDRESS: _____
- BANK AND ACCOUNT #: _____
- BRANCH ADDRESS & PHONE: _____
- OTHER REFERENCES – NAME/PHONE: _____
- MAKE & YR. OF CAR: _____
- CAR LICENCE NO.: _____
- DRIVER'S LICENCE NO.: _____
- PERSON TO CONTACT IN EMERGENCY – NAME: _____
- PERSON TO CONTACT IN EMERGENCY – PHONE: _____

E. INSURANCE. Do you presently insure your own belongings and third party liability? YES _____ NO _____

F. CONSENT. I hereby consent to FirstService Residential in collecting, using and disclosing my personal information for purposes of identifying me, communicating with me, determining my eligibility for the tenancy, assessing my credit worthiness, processing payments, responding to emergencies, ensuring the orderly management of the tenancy and complying with legal requirements. And in that regard I further consent to FirstService Residential in obtaining further personal information from my employer, my present and former landlord or property managers and one or more consumer credit agencies and authorize those persons to provide such information to FirstService Residential

G. _____
 Dated Signed Adult Applicant Signed Adult Applicant

H. DEPOSIT FirstService Residential acknowledges receipt of the deposit on behalf of the Landlord.

_____ _____ _____ _____
 Dated Received by Signed Phone No.

FirstService Residential
 200 Granville Street, Suite 700, Vancouver, B.C. V6C 1S4
 Office: 604.683.8900 Fax: 604.689.4829
 Website: www.fsresidential.com Email: info.bc@fsresidential.com