

RENTAL APPLICATION

APPLICATION DATE (dd/mm/yy):

*To submit completed application please email: office@fpm.ca
**Please attach Proof of Income, credit score, & Photo ID

I/We the named applicant(s) hereby make application to lease through Fleming Property Management the property located at:

Unit _____ \$ _____ \$ _____
Property Address _____ at a monthly rate of, _____ Parking (optional) _____ Commencing date (dd/mm/yy) _____

How did you hear about us? Website Google Kijij Referral Signs

APPLICANT # 1

APPLICANT # 2

| | | | |
|--|--|--|--|
| Name: _____ | | Name: _____ | |
| Date of Birth (dd/mm/yy) _____ | | Date of Birth (dd/mm/yy) _____ | |
| Cell # _____ | Home # _____ | Cell # _____ | Home # _____ |
| Work # _____ | Do you smoke? <input type="checkbox"/> YES <input type="checkbox"/> NO | Work # _____ | Do you smoke? <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Driver's License # _____ | | Driver's License # _____ | |
| Email: _____ | | Email: _____ | |
| Pets <input type="checkbox"/> NO <input type="checkbox"/> YES if yes, type _____ | | Pets <input type="checkbox"/> NO <input type="checkbox"/> YES if yes, type _____ | |

The applicant(s) agree to pay the following services **NOT** included in the monthly rent amount;

Hydro (electricity) Hot Water Tank Rental Water Gas Other _____

*** Proof of Tenant's Insurance must be provided to Fleming Property Management prior to occupancy. Keys will NOT be released until proof is provided.

PART 1 - RESIDENCE HISTORY

| | |
|---|---|
| Address _____ | Address _____ |
| From (dd/mm/yy) _____ To (dd/mm/yy) _____ | From (dd/mm/yy) _____ To (dd/mm/yy) _____ |
| Name of Landlord _____ | Name of Landlord _____ |
| Telephone: _____ | Telephone: _____ |
| Current Rent \$ _____ | Current Rent \$ _____ |

PART 2 - EMPLOYMENT INFORMATION

| | |
|-------------------------------|-------------------------------|
| Company _____ | Company _____ |
| Employer Contact Name _____ | Employer Contact Name _____ |
| Employer Contact # _____ | Employer Contact # _____ |
| Your Position/Title _____ | Your Position/Title _____ |
| Length of Employment _____ | Length of Employment _____ |
| Monthly Salary (Net) \$ _____ | Monthly Salary (Net) \$ _____ |

PART 3 - VEHICLE INFORMATION

| | | | |
|---------------------|--------------|---------------------|--------------|
| Make _____ | Model _____ | Make _____ | Model _____ |
| Year _____ | Colour _____ | Year _____ | Colour _____ |
| License Plate _____ | | License Plate _____ | |

I/We declare that all information given in this application is true and complete and will form part of the rental agreement.

I/We hereby give permission for Fleming Property Management to contact the landlords & employers listed above in order to confirm information provided.

I/We understand that if this application is rejected by Fleming Property Management (FPM), the deposit will be returned without interest and that FPM is not obligated to give any reason for the refusal. If I/We cancel the application, the deposit, once paid, will become non-refundable. Once the deposit is received it is considered confirmation by the applicant(s) of their intention to rent the premises applied for.

Applicant # 1 Signature

Applicant # 2 Signature

Date (dd/mm/yy)

Date (dd/mm/yy)