

Residential Tenancy Application

Each adult applicant (age 19 or older) must complete an application.

Minor occupants (under the age of 19) are to be listed under Step 4 - Occupants

This is a 2 page form. Please refer to both pages and complete all sections.

Items with "*" are mandatory.

Send completed forms to:

rental@westbankcorp.com

fax: (604) 893-1708

Section 1 - Preferences

Building

Unit Type or Suite # *

Yes

No

Interested in Penthouse?

Desired Move-In Date *

Lease Term

Desired Rent (per month) *

Yes

No

Parking required?

Yes

No

Storage required?

Section 2 - Applicant Information

Last Name *

First Name *

Initial

Email

Telephone (day) *

Telephone (eve) *

Date of Birth *

Current Address

Own

Rent

How Long?

Suite No.

Street Address *

City *

Province *

Postal Code *

Telephone

Building Manager/Landlord

Landlord's Telephone

Reason for Leaving

Previous Address

(if current address is less than 2 years)

Own

Rent

How Long?

Suite No.

Street Address

City

Province

Postal Code

Telephone

Building Manager/Landlord

Landlord's Telephone

Reason for Leaving

Residential Tenancy Application

Last Name *

First Name *

Section 3 - Financial & References

Yes No

Employed? *

Please choose: *

How Long?

Current Employer

Position

Net Earnings (per month) *

Employer Address

Supervisor Name

Telephone

Previous Employer (if current employers is less than 2 years)

Position

Net Earnings (per month)

Employer Address

Supervisor Name

Telephone

If Applicant is currently not working, is retired or is a student, we will ask for proof of your ability to pay in a form acceptable to the Landlord. If you are not a Canadian Citizen, we will need to see your Passport and Visa as proof of your capacity to remain in the country for the full term of the Lease.

Section 4 - Occupants

List all other adult and/or minor occupants who intend to occupy the rental unit.

Last Name

First Name

Date of Birth

Section 5 - Applicant Statements & Consent

Do you own any pets? *

Yes No

Are you a smoker? *

Yes No

Do you insure your belongings and are you insured for third party liability? *

Yes No

CONSENT: For purpose of determining whether this Application for Tenancy is acceptable, the Applicant consents to 8400 Granville Partnership (the "Landlord") obtaining credit, personal and employment information on the Applicant from one or more consumer reporting agencies and from other sources of such information. The Applicant authorizes the reporting agencies and any other person, including personnel from any government agency, to disclose relevant information about the Applicant to the Landlord. If this Application is accepted, the Applicant understands that the above information may also be used and disclosed for responding to emergencies, ensuring the orderly management of the tenancy and complying with legal requirements. For more information, please refer to the Landlord's Privacy Policy.

This Application does not form a "Tenancy". Subject to the Landlord's satisfactory review of this Residential Tenancy Application and the availability of a mutually acceptable unit, the Landlord and the Applicant will enter into a Residential Tenancy Agreement.

Applicant Signature *

Date *