

BRYDGES

PROPERTY MANAGEMENT

The Property Managers

Unit 2-1271 Sargent Avenue,
Winnipeg, MB R3E 0G3
Phone 204-489-9510
Fax 204-975-1540

This Section is for Office Use Only

Suite: _____ Building Address: _____ Lease Term: _____
Monthly Rent: \$ _____ Parking: \$ _____ Other: \$ _____ Total Rent: \$ _____
Security Deposit: \$ _____ Date Paid: _____
From: _____ To: _____

I submit this as an application and an offer to lease a suite from Brydges Property Management. I hereby tender a rental deposit in the amount of \$ _____ to the landlord. I understand and acknowledge that this deposit will bear interest at a rate which is set by regulation and is compounded annually. **I understand and acknowledge that once the application is accepted by the landlord, I agree to complete a tenancy agreement in the landlord's standard form.** I understand and acknowledge that if an arrangement to complete the tenancy agreement is not made within **three (3)** days upon the landlord's acceptance, or if I do not take occupancy on the commencement date as agreed upon, the deposit will be forfeited either in part or in whole. I understand and acknowledge that it is my responsibility to communicate with the resident manager or the office of the landlord concerning the status of my application. I further understand that I will **not** keep any pets without the **written authorization** of the landlord.

Name of Applicant (Print) Signature of Applicant Date: _____

Name of Applicant (Print) Signature of Applicant Date: _____

Method of Deposit Payment: Cash Cheque Money Order Debit

Please indicate suite number and building address.

APPLICANT # 1: (Please Print) _____
First Middle Last
Phone Number: _____ **Date of Birth: (MM/DD/YY):** _____
Social Insurance Number: _____ **Marital Status:** _____
PRESENT ADDRESS: _____ **City:** _____
Suite # Street
Province: _____ **Postal Code:** _____ **How Long?** _____
Landlord/Property Management: _____ **Phone Number:** _____ **Rent: \$** _____
PREVIOUS ADDRESS: _____ **City:** _____
Suite # Street
Province: _____ **Postal Code:** _____ **How Long?** _____
Landlord/Property Management: _____ **Phone Number:** _____ **Rent: \$** _____
PRESENT EMPLOYER: _____ **Phone Number:** _____
Address: _____ **Position:** _____ **How Long?** _____ **Income: \$** _____
PREVIOUS EMPLOYER: _____ **Phone Number:** _____
Address: _____ **Position:** _____ **How Long?** _____ **Income: \$** _____
BANK ADDRESS: _____ **Phone Number:** _____

EMERGENCY CONTACT: _____
First Middle Last
Address: _____ **Phone Number:** _____
REFERENCE: _____ **Phone Number:** _____
Address: _____ **Relationship:** _____

Please Turn Over

APPLICANT # 2: (Please Print) _____
First Middle Last

Phone Number: _____ **Date of Birth: (MM/DD/YY):** _____

Social Insurance Number: _____ **Marital Status:** _____

PRESENT ADDRESS: _____ **City:** _____
Suite # Street

Province: _____ **Postal Code:** _____ **How Long?** _____

Landlord/Property Management: _____ **Phone Number:** _____ **Rent: \$** _____

PREVIOUS ADDRESS: _____ **City:** _____
Suite # Street

Province: _____ **Postal Code:** _____ **How Long?** _____

Landlord/Property Management: _____ **Phone Number:** _____ **Rent: \$** _____

PRESENT EMPLOYER: _____ **Phone Number:** _____

Address: _____ **Position:** _____ **How Long?** _____ **Income: \$** _____

PREVIOUS EMPLOYER: _____ **Phone Number:** _____

Address: _____ **Position:** _____ **How Long?** _____ **Income: \$** _____

BANK ADDRESS: _____ **Phone Number:** _____

EMERGENCY CONTACT: _____
First Middle Last

Address: _____ **Phone Number:** _____

REFERENCE: _____ **Phone Number:** _____

Address: _____ **Relationship:** _____

OTHER OCCUPANTS IN THE SUITE:

Name: _____ **Age:** _____ **Relationship:** _____

Name: _____ **Age:** _____ **Relationship:** _____

VEHICLE(S):

Year: _____ **Make/Model:** _____ **Colour:** _____ **Plate #:** _____

Year: _____ **Make/Model:** _____ **Colour:** _____ **Plate #:** _____

I hereby declare that the information provided above is true and complete. I agree to authorize Brydges Property Management to conduct an investigation and credit check based on the information contained in this application. I understand and acknowledge that the failure to obtain an accurate and satisfactory credit report may, in Brydges Property Management's sole discretion, adversely affect my application. I understand and acknowledge that if any information provided in the above application is incorrect, Brydges Property Management may at its option terminate my tenancy agreement upon **thirty (30)** days written notice or reject the application, whichever is relevant. This application is subject to approval and acceptance by Brydges Property Management. (Consent & disclosure attached as per Canada's Privacy Act).

Applicant Signature

Applicant Signature

Date: _____

How were you referred to us? **Newspaper:** ____ **Renters Guide:** ____ **Drive By:** ____ **Other:** ____

CONSENT TO DISCLOSURE OF INFORMATION

I hereby consent to the use or to the disclosure of the personal information collected in this application for the purposes of the landlord to determine my household's eligibility for tenancy, administer tenant agreements and, prevent and detect fraud. I authorize any person, agency, organization or financial institution to release and/or exchange information for the above-mentioned purposes. I understand that this consent includes requests pertaining to my employment, income, liabilities and resources, family status as well as my standing with any current and previous landlords. I understand that the use or disclosure of the personal information collected in this application will also be used to enable Brydges Property Management to provide ongoing service, manage Brydges Property Management's business and to meet legal requirements.

A photocopy of this signed Consent to Disclosure is sufficient to authorize the disclosure and/or exchange of information.

Name of Applicant (Print)

Signature of Applicant

Date: _____

Name of Applicant (Print)

Signature of Applicant

Date: _____

Signature of Witness

Date: _____