

A. OFFER TO RENT

We hereby make an application to rent a rental unit in _____ known as:

Suite # _____ Building Address _____ (the residential property.)

at a monthly rent of \$ _____ plus parking fees of \$ _____ plus other fees of \$ _____ for a total monthly cost of \$ _____

The above rent includes only the utilities checked below. Payment for all other utilities is the tenant's responsibility.

Heat Water Supply Hot Water Electricity Cablevision Gas to Fireplace Garbage/Recycling Collection Sewage Disposal Other _____

OCCUPANCY DATE _____ **DATE OF APPLICATION** _____

Landlord's Name _____ Landlord's Address _____ Phone # _____

The Tenancy Agreement will also include specific terms related to the following:

The Applicant will pay a **Security Deposit of \$** _____ to the Landlord if this application is accepted. If the Landlord permits the Applicant to have a pet, an additional **Pet Damage Deposit of \$** _____ will be paid to the Landlord. The Landlord will hold the Dposit(s) until the tenancy ends.

B. FIRST APPLICANT'S PRIMARY INFORMATION

Last Name		First Name		Middle Name		Date of Birth (MM/DD/YY)		Social Insurance Number		
Present Address					City		Postal Code		Primary Phone #	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	How Long?		Reason for Leaving				Current Rent \$		
Previous Address					City		Postal Code			
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	How Long?		Reason for Leaving				Final Rent \$		

C. CO-APPLICANT'S PRIMARY INFORMATION (COMPLETE ONLY WHERE DIFFERENT FROM FIRST APPLICANT)

Last Name		First Name		Middle Name		Date of Birth (MM/DD/YY)		Social Insurance Number		
Present Address					City		Postal Code		Primary Phone #	
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	How Long?		Reason for Leaving				Current Rent \$		
Previous Address					City		Postal Code			
Rent <input type="checkbox"/>	Own <input type="checkbox"/>	How Long?		Reason for Leaving				Final Rent \$		

D. APPLICANT'S STATEMENTS

I/We do not own any pets I/We own a pet or pets If owned, describe pet(s), including breed _____
 I/We are non-smokers I/We are smokers As co-applicants we consent to a joint credit report Yes No
NOTE: Landlords are not responsible for tenants' possessions. If accepted you must carry tenants' insurance covering your possessions and protecting you against liability
 I/We presently insure our belongings and for third party liability Yes No

E. CONSENT

The Applicant consents to the Landlord obtaining credit, personal and employment information for the sole purpose of obtaining a rental lease with Concept Property Group. The Applicant authorizes reporting agencies and any other personnel to disclose relevant information about the Applicant to the Landlord. If this application is accepted the information provided may be used for responding to emergencies or for legal requirements. All information obtained in this application is strictly confidential.

F. APPLICANT'S SIGNATURES

I/We certify that all information provided by me/us in this Application is true and correct.

Applicant's Signature _____ Date Signed _____ Co-Applicant's Signature _____ Date Signed _____

G. LANDLORD'S ACCEPTANCE

NOTE: Do not sign this form unless you decide to accept the Applicant(s) as your tenant(s).

Landlord's Signature _____ Date Signed _____

NOTE TO LANDLORD: If pages one and two are separated, enter the Applicant's name(s) and date of application below.

First Applicant _____ Co-Applicant _____

Date of Application _____

H. FIRST APPLICANT'S SUPPLEMENTARY INFORMATION

Primary Phone #	Secondary Phone #	Work Phone #	Fax #
Email Address		Photo ID Shown Yes <input type="checkbox"/> No <input type="checkbox"/>	
Present Landlord/Building Manager's Name	Address		Phone #
Previous Landlord/Building Manager's Name	Address		Phone #
Employer	Position		Gross Monthly Income
Supervisor's Name	Supervisor's Phone #		Length of Employment
Previous Employer	Position		Gross Monthly Income
Previous Supervisor's Name	Supervisor's Phone #		Length of Employment

PLEASE GIVE THE NAME OF A BUSINESS OR PERSONAL REFERENCE

Name	Address	Phone #	Relation
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PLEASE GIVE THE NAME OF AN EMERGENCY CONTACT

Name	Address	Phone #	Relation
Name	Address	Phone #	Relation

I. CO-APPLICANT'S SUPPLEMENTARY INFORMATION (COMPLETE ONLY WHERE DIFFERENT FROM FIRST APPLICANT)

Primary Phone #	Secondary Phone #	Work Phone #	Fax #
Email Address		Photo ID Shown Yes <input type="checkbox"/> No <input type="checkbox"/>	
Present Landlord/Building Manager's Name	Address		Phone #
Previous Landlord/Building Manager's Name	Address		Phone #
Employer	Position		Gross Monthly Income
Supervisor's Name	Supervisor's Phone #		Length of Employment
Previous Employer	Position		Gross Monthly Income
Previous Supervisor's Name	Supervisor's Phone #		Length of Employment

PLEASE GIVE THE NAME OF A BUSINESS OR PERSONAL REFERENCE

Name	Address	Phone #	Relation
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PLEASE GIVE THE NAME OF AN EMERGENCY CONTACT

Name	Address	Phone #	Relation
Name	Address	Phone #	Relation

J. OTHER ADULT OCCUPANTS (FULL NAMES OF ALL OTHER ADULT PERSONS OVER THE AGE OF 18 TO OCCUPY THIS RENTAL UNIT)

Last Name	First Name	Middle Name	Last Name	First Name	Middle Name
Last Name	First Name	Middle Name	Last Name	First Name	Middle Name

K. OTHER MINOR OCCUPANTS (FULL NAMES OF ALL OTHER PERSONS UNDER THE AGE OF 18 TO OCCUPY THIS RENTAL UNIT)

Last Name	First Name	Middle Name	Birth Date	Last Name	First Name	Middle Name	Birth Date
Last Name	First Name	Middle Name	Birth Date	Last Name	First Name	Middle Name	Birth Date

NOTES TO APPLICANT(S)

Social Insurance Numbers are requested for the sole purpose of obtaining credit reports.

The information you provided on this page continues as part of your Application for Tenancy. Your signature on the first page confirms all information on both pages is true and correct.

We report tenant pay habits to a credit reporting agency on the 3rd day of every month for the entirety of your lease agreement.