



## Thank you for choosing a Real Property Management Service home.

The following documentation is required in order to begin and complete the application process.

1. Please complete **one application for each adult** (18yrs+).
2. Please have **ALL** guarantors complete a separate application.
3. Guarantors **must** provide a current Letter of Employment with proof of income.
4. Complete each application fully and legibly which will allow us to conduct a credit check. (Please note that we do not accept outside reports.)
5. Submit your application(s) with the following:
  - A **current** Letter of Employment
  - If **self-employed or on commission**, Notice of Assessment for previous year
  - A **current** pay stub/proof of income for each adult applicant if self-employed
  - Last month's rent in certified funds, payable to: **Real Property Management Service**

**Upon receipt of all items, the application will be processed, which may take up to three business days. You will be contacted once your application has been processed.**

**If NOT approved, the above documentation will be available for pick up at our business office Monday to Friday, 9:00 A.M. to 5:00 P.M.**

**If approved, the following documentation is required before unit keys will be provided:**

1. A signed Real Property Management Service Tenancy Agreement (Lease)
2. First month's rent in certified funds (Rent will be pro-rated if the move-in date is after the first of the month.)
3. A Refundable Key Deposit, in certified funds, in the amount of \$20.00 or \$200.00 if a condominium property
4. Proof of Renters' Insurance including contents and liability
5. Utility account numbers if applicable:
  - (A.) **Electricity:** \_\_\_\_\_
  - (B.) **Gas:** \_\_\_\_\_
  - (C.) **Water and Waste:** \_\_\_\_\_

If you have any questions, please contact us at **416-642-1404** or you may E-mail us at: [support@rpmservice.ca](mailto:support@rpmservice.ca). Also, you may visit our website at: [www.rpmservice.ca](http://www.rpmservice.ca) for further information.

Real Property Management Service  
3046 Bloor Street West, Toronto, Ontario M8X 1C4  
416-642-1404 info@rpmservicetoronto.com

*Each office is independently owned and operated*

# RENTAL APPLICATION

INSTRUCTIONS: Please complete all sections on both pages. Please print all information. Mark "N/A" in any blanks that do not apply.

Then send to **Real Property Management Service**

Phone: 416-642-1404, Fax: 416-232-2104, email: [info@rpm-service.ca](mailto:info@rpm-service.ca)

3046 Bloor St. W. Toronto, Ontario, M8X1C4

Rental Property	Unit #	Rental Rate	Date Required	Any Pets:
<b>PERSONAL INFORMATION</b>				
<b>Applicant's Full Name</b>			H Phone #	
First Initial Surname			M Phone #	
SIN	Date of Birth <small>month/day/year</small>	Driver's Licence Number:		
Email				
<b>Co-Applicant's Full Name</b>			H Phone #	
First Initial Surname			M Phone #	
SIN	Date of Birth <small>month/day/year</small>	Driver's Licence Number:		
Email				
<b>Other Residents (Include Children)</b>		<b>Relationship</b>		<b>Age</b>
1.				
2.				
3.				
<b>RESIDENTIAL HISTORY</b>				
<b>Current Address</b>			City	Postal Code
Street				
How long there	Rental amount	Landlord		Phone #
Reason for leaving				
<b>Previous Address</b>			City	Postal Code
Street				
How long there	Rental amount	Landlord		Phone #
Reason for leaving				
<b>EMPLOYMENT HISTORY</b>				
<b>Applicant's Employment History</b>				
Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other				
Employer		<input type="checkbox"/> Current <input type="checkbox"/> Previous		Length of Employment
Employer's Address				
Supervisor/Caseworker		Phone #		Income
<b>Co-Applicant's Employment History</b>				
Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other				
Employer		<input type="checkbox"/> Current <input type="checkbox"/> Previous		Length of Employment
Employer's Address				
Supervisor/Caseworker		Phone #		Income

(CONTINUED ON NEXT PAGE)

**LOANS**

Institution	Address	Monthly Payment	Balance
1.			
2.			
3.			

**AUTOMOBILES**

Make / Model	Year / Color	License Plate Number	Province
1.			
2.			

**EMERGENCY CONTACT INFORMATION**

In Case of Emergency Contact		Phone #
Address	Relationship	

**NOTE:** Upon execution of the lease and occupancy of the premises by the tenant, the deposit, if there is one, shall become a rent deposit to be applied towards the last month's rent.

How did you learn about this property?

I hereby certify that the above information is true and complete and that I have not withheld any information relevant to this application. It is also understood that the property management and/or owner reserve the right to reject this application. I have read and understand these conditions.

I/we know that I/we have the right to verify the information about me/us held by credit reporting agencies, that the landlord and its agents are entitled to rely on such credit reports as being correct, and I/we release any claim I/we may have arising from reliance on that information.

I/we hereby give irrevocable permission to the Landlord or its agents to obtain at any time a consumer/credit report about me/us, to contact previous landlords to obtain information about my/our previous tenancies, to contact agencies that provide landlord information, to contact my references, and to take any other reasonable steps necessary to assess this rental application or for any amendment or renewal of my/our tenancy. I/we provide my/our irrevocable consent to the Landlord or their agents to disclose information from my rental application and information arising from any tenancy between us to any third party for the purpose of contributing information to a database of tenant information to be used in providing consumer/credit reports.

\_\_\_\_\_  
Applicant Signature                      Date                                      Co-Applicant Signature                      Date

**FOR OFFICE USE ONLY**

REFERENCE VERIFICATION	APPLICATION	DEPOSITS
<input type="checkbox"/> Present Address <input type="checkbox"/> Previous Address <input type="checkbox"/> Employment <input type="checkbox"/> Income <input type="checkbox"/> Credit	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved  _____                      _____ Date                                      Initials  _____ Date of Occupancy	 _____                      _____  _____                      _____ Date                                      Amount