Application for Residential Tenancy



Schinkel Properties Inc.
8C Brandt St, Steinbach, MB R5G 1Y2 • PHONE: 204.326.2640

	:: THE FC	LLOWING INFORMAT	TION IS STRICTLY CO	NFIDENTIAL	::			
LOCATION:	REQUIRED MOVE-IN DATE:							
PERSONAL INFORMATION OF APPLICANT			PERSONAL INFORMATION OF CO - APPLICANT					
APPLICANT'S NAME			CO-APPLICANT'S NAME					
DATE OF BIRTH (YYYY/MM/DD)	DATE OF BIRTH (YYYY/MM/DD)							
TELEPHONE	TELEPHONE							
DRIVER'S LICENSE NUMBER	DRIVER'S LICENSE NUMBER							
PRESENT ADDRESS	PRESENT ADDRESS							
PRESENT LANDLORD OR MANAGER		TELEPHONE PRESENT LANDLORD OR MANAGE				TELEPHONE		
RENT AMOUNT	HOW LONG?		RENT AMOUNT HOW LONG?					
REASON FOR LEAVING			REASON FOR LEAVING					
FORMER ADDRESS			FORMER ADDRESS					
FORMER LANDLORD OR MANAGER		TELEPHONE	FORMER LANDLORD OR MANAGER			TELEPHONE		
FORMER RENT AMOUNT	HOW LONG?		FORMER RENT AMOUNT		HOW LONG?			
LIST NAMES OF ALL PERSONS WHO WILL OCCUPY THE SUITE WITH	You — including	THE AGES OF ALL PERSONS UNDER THE AGE OF	F 18					
I		I	1					
EMPLOYER, OR SOURCE AND LEVEL OF INCOME: If you are employed, please list your employer: O	R, if unemploy	ed list your source of income. Use	e back of this page if additional	space is required.				
APPLICANT'S EMPLOYMENT HISTORY								
	FULL TIME	PART TIME	STUDENT	RETIRED	UNEMP	PLOYED	OTHER	
EMPLOYER				CURRENT PREVIOU:		OF EMPLOYMENT		
EMPLOYERS ADDRESS								
SUPERVISOR / CASEWORKER		PHONE		INCOME (AFTER TAX)			MONTHLY	
							BI-WEEKLY	
CO - APPLICANT'S EMPLOYMENT HISTORY STATUS (please check one):	FULL TIME	PART TIME	STUDENT	RETIRED	UNEMP	UOVED	OTHER	
EMPLOYER	1 022 111112	71111111111	3/352.11	CURRENT	LENGTH C	DF EMPLOYMENT	O III.E.II	
EMPLOYERS ADDRESS				PREVIOUS				
SUPERVISOR / CASEWORKER		PHONE		INCOME (AFTER TAX)			MONTHLY	
							BI-WEEKLY	

REQUIRE 1 YEAR RESIDENCE AND EMPLOYMENT RECORD IF YOU HAVE NO PREVIOUS TENANCY RECORD, OR ARE UNDER THE AGE OF MAJORITY, YOU MAY BE REQUIRED TO PROVIDE A CO-SIGNER AT OUR REQUEST

OTHER INFORMATION							
NAME OF BANK				PHONE			
CAR (MAKE / MODEL)	MAKE / MODEL) YEAR / COLOR				LICENSE PLATE NUMBER		
CAR (MAKE / MODEL)		LICENSE PLATE NUMBER					
REFERENCES							
APPLLICANTS REFERENCES [NAME & ADDRESS]				PHONE		RELATIONSHIP	
APPLLICANTS REFERENCES [NAME & ADDRESS]	PHONE		RELATIONSHIP	RELATIONSHIP			
CO-APPLLICANTS REFERENCES [NAME & ADDRESS]	PHONE		RELATIONSHIP	RELATIONSHIP			
CO-APPLLICANTS REFERENCES [NAME & ADDRESS]	PHONE		RELATIONSHIP	RELATIONSHIP			
CO AT LEIGHTS HELEILINGES (WITE A ADSTRESS)	1116112		TEB WORST				
NAME OF PERSON TO CONTACT IN CASE OF EM	IERGENCY						
NAME & ADDRESS	PHONE		RELATIONSHIP	RELATIONSHIP			
NAME & ADDRESS	PHONE		RELATIONSHIP	RELATIONSHIP			
PETS							
YOUR RESIDENTIAL TENANCY AGREEMENT STATES IN SECTI "THE TENANT WILL NOT KEEP OR ALLOW TO BE KEPT WITH		DR OTHER ANIMAL WITHOUT WRITTEN PERM	MISSION OF THE LANDLORD".				
BREED	FULL GROWN WEIGHT		DOG	DOG			
						CAT	
Have you any unpaid judgments of Have you been evicted from, or as Have you left any previous accommave you been convicted of a Felo Have you declared bankruptcy in the * If you wish to explain your responses			YES YES YES YES YES	NO NO NO NO			
	NE 05 01005T0 1110 11111	2011 001 (501) 00		0.1.0.0.U.T./			
CAF	RE OF CARPETS AND WINE	OOW COVERINGS ARE TH	E TENANTS RESPO	ONSIBILITY AF	TER MOVE IN		
	ND THAT MISRE						
CONSENT: I / We hereby declare that I am ove any misrepresentation or omission of informat personal information reports on me/us (includ of the application. (If accepted, the cost of the landlord or landlord's authorized agent. I/we Properties Inc. It will not be returned.	cion is grounds for eviction. For the ling spouse) from one or more cons e criminal record check will be ded	purposes of determining whether sumer reporting agencies or from c ucted from the first month's rent)	my/our application for to other sources of such into . I/we authorize the rep	tenancy is accepta formation. If asked porting agencies a	ble, I/we hereby cor d, I/we are willing to nd other persons to	sent Schinkel Properties obtain a criminal record disclose information on	Inc. to obtain check as part me/us to the
APPLICANT'S SIGNATURE:					DAT	E:	
CO ADDITICANT'S SIGNATURE					D * T	c.	
CO - APPLICANT'S SIGNATURE:					DAT	L	
FOR OFFICE USE ONLY							
REFERENCE VERIFICATION	APPLICATION			DEPOSITS			
		8		DEPUSITS			
☐ PRESENT ADDRESS * ☐ FORMER ADDRESS ☐ EMPLOYMENT* ☐ CO-APPLICANT	□ APPROVED	☐ NOT APPROVED					
* PEOLUPED							