

APPLICATION FOR TENANCY

I/We acknowledge and understand that Proline Management Ltd. and its employees are acting solely as agents for the owners. I/We, the undersigned, herein also known as the applicant(s), hereby offer to rent residential premises in British Columbia known as: Suite No.______ Building Address______ at a monthly rent of \$_____ plus parking

\$_____ Total \$_____ Desired Occupancy Date______ The applicant agrees to pay a security deposit equal to half a month's rent upon approval of this application. The Landlord or Landlord's Authorized Agent will hold the security deposit, until the tenancy terminates. I/We further agree that if this application is accepted, I/We will enter a Residential Tenancy Agreement for a minimum period of ______. This application is subject to acceptance by the Landlord's Authorized Agent and is open for acceptance for FIVE business days, ending at 5 p.m. following the date herein, or until ______. If you are self-employed, please provide a short description of your business on the reverse and verification of your business and its income.

APPLICANT'S					DATE OF BIRTH (MM/DD/YY)					
					EMAIL					
PHONE(S)					EMAIL					
PRESENT					CIT	Y	PROV		POSTAL CODE	
ADDRESS										
HOW	RENT/OWN	OWN MONTHLY RENT		REASON FOR						
LONG?		\$ LEAVING								
BUILDING MANAGER/	CELL PHONE				PHONE/EMAIL					
LANDLORD/LISTING REAL										
PREVIOUS						Y	PROV		POSTAL CODE	
ADDRESS										
HOW	RENT/OWN	MONTHLY RENT REASON F			OR					
LONG?	\$ LEAV									
				CELL PHONE			PHONE/EMAIL			
LANDLORD/LISTING REAL										
EMPLOYER				POSITION			HOW			
							LONG?			
SUPERVISOR PH			HONE			CELL PHONE		CURRENT GROSS MONTHLY		
								INCOME		
TWO PERSONAL OR BUSINESS (NON-FAMILY) REFERENCES										
NAME			ADDRESS			PHONE				
NAME			ADDRESS			PHONE				

EACH ADULT TENANT MUST COMPLETE A SEPARATE APPLICATION:

Full names of all OTHER ADULT persons (age 19 or older) to occupy the premises for 14 days or more within a year are:

Full names of all MINOR RESIDENTS (under 19, including infants). Include full names and ages of each minor to occupy the premises, or who will be staying for, more than 14 days or more within a year.

Age:			Age			Age:
BUSINESS: Do you intend to operate a	a busine	ss from the premises?		Yes	Νο	
PETS: Do you have any pets? Yes	No	If YES list Type:	Number:		Spayed/Neutered:	Age:
SMOKING: Do you smoke? Yes	No		Do you vape?	Yes	No	

CONSENT: I hereby consent to Proline Management Ltd. collecting, using and disclosing my personal information for purposes of identifying me, communicating with me, determining my eligibility for the tenancy, assessing my credit worthiness, processing payments, responding to emergencies, ensuring the orderly management of the tenancy and complying with legal requirements. And in that regard I further consent to Proline Management Ltd. obtaining further personal information from my employer, my present and former landlord or property managers and one or more consumer agencies and authorize those persons to provide such information to Proline Management Ltd. I understand that I am applying for a property for which insurance is required for my personal belongings and agree to carry third party liability coverage.

Signed (Adul Date:	Approved (PM Initials & Date):
	888 Attree Avenue, Langford, BC V9B 0A6 Victoria: 250.475.6440 Nanaimo: 250.754.6440 Courtenay: 250.338.6900 proline@prolinemanagement.com www.prolinemanagement.com
	PROLINE MANAGEMENT LTD.