



# ALBERTA PROPERTY MANAGEMENT SOLUTIONS INC.

Address Applied for: \_\_\_\_\_

Date possession is requested: \_\_\_\_\_

Length of Lease: \_\_\_\_\_

Pets? Yes \_\_\_\_\_ No \_\_\_\_\_

**Important: THE CONSENT TO DISCLOSE PAGE OF THIS APPLICATION FORM MUST BE SIGNED OR WE CAN'T PROCESS YOUR APPLICATION. Failure to fill this form out correctly and completely may result in your application being denied.**

Applicants full legal name	
Date of birth	
Social Insurance number	
Home phone number	
Work phone number	
Cell phone number	
Email Address	

Current Address	
City and Province	
Postal Code	
Do you rent or own current residence	
If renting, current landlord's name	
Landlord's phone number	
Current rent or mortgage	
Date you moved to your current residence	
Date your current lease expires	
Reason for moving	
Have you given 30 days notice	

Previous address	
City and province	
Postal Code	
Did you rent or own this property	
If rented, Landlord's name	
Landlord's phone number	
Length of stay	
Reason for moving	

Name of your current employer	
Your Job title	
Address of Employer	
Name of Human Resources Rep	
Supervisor's phone number	
Employment start date	
Monthly gross income	

Name of your prior employer	
Your Job title	
Address of Employer	
Name of Human Resources Rep	
Supervisor's phone number	
Employment start date	
Employment end date	
Monthly gross income	

Other regular sources of income (such as child support, family allowance, or other income)	
Amount per month	

Name, Age and Relationship of all intended occupants; Picture ID is required for all applicants over the age of 18.

Name	
Age	
Relationship	
Name	
Age	
Relationship	
Name	
Age	
Relationship	

Name of Reference	
Reference's occupation	
Reference's phone number	
How do you know this person	
How long have you know this person	

Name of Reference	
Reference's occupation	
Reference's phone number	
How do you know this person	
How long have you know this person	

Relatives or friends who can be contacted in case of emergency

Name	
Phone Number	
Relationship to you	

I hereby apply for the rental premises as indicated on page one of this application form. I understand that by signing this application, a binding offer to rent or lease said premises is created and in the event that the Landlord accepts my application and I withdraw or cancel, I understand my deposit will be forfeited and I will be bound to the terms of this application making me liable for any loss of income incurred by the Landlord as a result of my cancellation. If accepted, I agree to sign a lease and/or written tenancy agreement. I understand that a credit, reference and other relevant investigation will be undertaken to determine my rental, court, tribunals, employers, and personal references to disclose any pertinent information about me.

In the event that the landlord does not accept this application, reasons for refusal shall not be divulged, but my deposit will be refunded in full.

This application is governed by the local laws and Province in Canada as the law requires.

Date: \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Applicant's signature: \_\_\_\_\_

## REQUIREMENTS PRIOR TO LEASING

1. Tenant's insurance- \$1,000,000 liability
2. Photo ID
3. Security Deposit (bank draft, money order, cash)
4. Post-dated cheque for the first month's rent (payments for security deposit and first month rent must be made in SEPARATE cheque, money order or bank draft).
5. Set up of monthly rent payment (post-dated cheques, or save a tree and set up EFT and or PAD agreement with a void cheque)
6. If applicable, picture of pet and pet fee of non-refundable \$500.00
7. Alberta Property Management requires the following account numbers when tenants are responsible for utilities:
  - a. **Electricity:** Direct Energy 1-888-420-3181 Enmax: 1-877-571-7111
  - b. **Natural Gas:** Direct Energy - 1-866-420-3174 Enmax: 1-877-571-7111
  - c. **Municipal water and sewer-** 780-743-7965

**Please note: Possession of keys and move in inspection is performed on the day of tenancy. If you wish to move in early you will be charged for the days prior to tenancy.**

**CONSENT TO DISCLOSURE OF PERSONAL INFORMATION**  
**Xpera HRservices**

**PLEASE PRINT (To be completed by applicant)**

Surname (Provide previous names prior to application if applicable)		First Name	Second (Middle) Name	
Maiden Name or Other Surnames Used (if applicable):		Place of Birth (If other than Canada, please also note date of entry to Canada):		
Date of Birth (YY-MM-DD)	Sex	Phone #	Driver's Licence Number	SIN
Number	Street	Apt / Unit	City/Province/Country	Postal Code

*\* Note: Provide previous addresses if you did not reside at the above address for more than five years*

Number	Street	Apt/Unit	City/Province/Country	Postal Code
Number	Street	Apt/Unit	City/Province/Country	Postal Code

*Note: Information is Collected and Disclosed According to Section 29(1) & 32 of the MFIPPA as well as PIPA & PIPEDA*

<p><b>RELEASE AUTHORIZATION AND WAIVER</b></p> <p><u>AUTHORIZATION TO RELEASE INFORMATION</u></p> <p>I certify that the information set out by me in this application is true and correct to the best of my ability. I consent to the release of a Credit Report to Xpera HRservices and its partner.</p>	<p><b>SEARCH AUTHORIZATION</b></p> <p>I HEREBY CONSENT TO THE SEARCH AND RELEASE OF:</p> <p>A. Credit Report</p> <p>Signed this _____ day of _____, 20____</p> <p>_____</p> <p align="center">(Signature of Applicant)</p>
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