



ASSOCIATED PROPERTY MANAGEMENT (2001) LTD.

Return this form in person or by fax to:

#1 – 1441 St. Paul Street
Kelowna, B.C. V1Y 2E4
Phone: (250) 869-8824
Fax: (250) 712-2265

PROPERTY MANAGER: _____
www.apmkelowna.com

AGENCY DISCLOSURE & OFFER TO RENT

You MUST complete and SIGN ALL FORMS. Additional details may be written on the back of this form

Associated Property Management (2001) Ltd. is the agent for the landlord in all residential rental/leasing and property management transactions. The Property Manager you work with has a legal and ethical duty to provide you with accurate and honest answers to your questions. We can explain rental/leasing terms, assist in viewing properties and preparing the tenancy/lease agreement. As the agent for the landlord, we cannot negotiate on your behalf or disclose confidential information about the landlord. You should not provide any information to Associated Property Management (2001) Ltd. that you would not provide directly to the Landlord.

I/we acknowledge having received and read this information. I/we acknowledge that there is no existing Agency Relationship between myself/us and Associated Property Management (2001) Ltd.

I/we offer to rent the premises located at _____ in _____, B.C.

At a rental rate of \$_____ per month plus / including all utilities. Occupancy date: _____, 200_____

Your offer is for Yearly Monthly Other: _____ [1 Year Lease Term Usually Required]

Print the full names of all tenants and occupants of the premises: _____

If this offer is accepted, the undersigned agrees that a binding Agreement shall be created between the parties hereto and the undersigned shall forthwith enter into a Tenancy Agreement, considering the above terms and prior to possession of the premises. This offer is open for acceptance by the Landlord for five (5) business days ending at 6:00 p.m. on the last day. If the offer is not accepted, any collected deposit will otherwise be refunded. If the offer is accepted and the applicant fails to sign the Tenancy Agreement, then the applicant understands and agrees to be held liable for payment of one or more month's rent of said property to the landlord as liquidated damages under the Residential Tenancy Act, and the applicant agrees to assign any deposit monies paid on account to the Manager by way of the signature below.

The tenant further acknowledges and agrees that the security deposit paid by the tenant may be paid to or on behalf of the Landlord and in that case, that it will be the Landlord rather than the Property Manager who will be responsible for returning the security deposit and accumulated interest to the tenant upon the termination of the tenancy.

PLEASE SIGN BELOW (A signature from each applicant is also required on the next page. **Unsigned or incomplete applications may not be processed**):

TENANT SIGNATURE

TENANT SIGNATURE

TENANT SIGNATURE

TENANT SIGNATURE

TENANT SIGNATURE

TENANT SIGNATURE

APPLICANT(S) INFORMATION:

Applications to be completed in **full** for each adult. We reserve the right to refuse to consider this application unless signed and that all pertinent questions contained herein are answered completely and honestly. If you owned your own home, are going to school, or have an alternate source of income, please indicate this just the same.

NAME: _____ NAME: _____
PHONE: Res. _____ Bus. _____ Cell. _____ PHONE: Res. _____ Bus. _____ Cell. _____
RELATIONSHIP OF PARTIES: Room Mates Boyfriend/Girlfriend Spouse Family Member Other: _____

Ensure that you complete ALL blanks, all applicable phone numbers, and all contact names

CURRENT ADDRESS: _____	CURRENT ADDRESS: _____
CITY: _____ POSTAL CODE: _____	CITY: _____ POSTAL CODE: _____
CURRENT LANDLORD'S NAME: _____	CURRENT LANDLORD'S NAME: _____
LANDLORD'S PHONE: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No	LANDLORD'S PHONE: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No
FROM: _____ TO: _____	FROM: _____ TO: _____
REASON LEAVING: _____	REASON LEAVING: _____
STYLE: <input type="checkbox"/> Hse <input type="checkbox"/> Twnhse <input type="checkbox"/> Apt <input type="checkbox"/> Suite <input type="checkbox"/> Dplx <input type="checkbox"/> Shared RENT: \$ _____	STYLE: <input type="checkbox"/> Hse <input type="checkbox"/> Twnhse <input type="checkbox"/> Apt <input type="checkbox"/> Suite <input type="checkbox"/> Dplx <input type="checkbox"/> Share RENT: \$ _____
Breaking A Lease? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Gave proper notice to Landlord?	Breaking A Lease? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> proper notice to Landlord?
PREV. ADDRESS: _____	PREV. ADDRESS: _____
LANDLORD NAME: _____	LANDLORD NAME: _____
LANDLORD'S PHONE: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No	LANDLORD'S PHONE: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No
FROM: _____ TO: _____	FROM: _____ TO: _____
REASON LEFT: _____	REASON LEFT: _____
STYLE: <input type="checkbox"/> Hse <input type="checkbox"/> Twnhse <input type="checkbox"/> Apt <input type="checkbox"/> Bsmt <input type="checkbox"/> Upper <input type="checkbox"/> Dplx RENT: \$ _____	STYLE: <input type="checkbox"/> Hse <input type="checkbox"/> Twnhse <input type="checkbox"/> Apt <input type="checkbox"/> Bsmt <input type="checkbox"/> Upper <input type="checkbox"/> Dplx RENT: \$ _____
Security Deposit Returned in Full? <input type="checkbox"/> Yes <input type="checkbox"/> No	Security Deposit Returned in Full? <input type="checkbox"/> Yes <input type="checkbox"/> No
OCCUPATION / PRGRM: _____	OCCUPATION / PRGRM: _____
COMPANY/SCHOOL: _____	COMPANY/SCHOOL: _____
LENGTH/EMPLOY: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No	LENGTH/EMPLOY: _____ FAMILY?: <input type="checkbox"/> Yes <input type="checkbox"/> No
CONTACT: _____ PHONE: _____	CONTACT: _____ PHONE: _____
MONTHLY <u>NET</u> INCOME: \$ _____ Hrs/Wk: _____	MONTHLY <u>NET</u> INCOME: \$ _____ Hrs/Wk: _____
SEASONAL POSITION? <input type="checkbox"/> Yes <input type="checkbox"/> No	SEASONAL POSITION? <input type="checkbox"/> Yes <input type="checkbox"/> No
SIN: _____	SIN: _____
BIRTH DATE: _____	BIRTH DATE: _____
EMERGENCY CONTACT: _____	EMERGENCY CONTACT: _____
RELATIONSHIP: _____ PHONE: _____	RELATIONSHIP: _____ PHONE: _____
PETS: <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____ SMOKER?: <input type="checkbox"/> Yes <input type="checkbox"/> No	PETS: <input type="checkbox"/> Yes <input type="checkbox"/> No Type: _____ SMOKER?: <input type="checkbox"/> Yes <input type="checkbox"/> No
HAVE YOU EVER BEEN EVICTED? <input type="checkbox"/> Yes <input type="checkbox"/> No	HAVE YOU EVER BEEN EVICTED? <input type="checkbox"/> Yes <input type="checkbox"/> No
WILL YOU CONSENT TO A CRIMINAL RECORD CHECK? <input type="checkbox"/> Yes <input type="checkbox"/> No	WILL YOU CONSENT TO A CRIM. RECORD CHECK? <input type="checkbox"/> Yes <input type="checkbox"/> No

The above information is collected for the purposes of tenant selection and will only be shared for the purposes of managing the residential tenancy, real estate purposes, and collection of debts. This application is subject to all reference and credit reports being satisfactory to Associated Property Management (2001) Ltd. For the purpose of determining whether my/our application for tenancy is acceptable, I/we hereby consent to the Landlord obtaining credit/personal information on me/us from one or more sources (including the Ministry of Human Resources, Employer, Former Landlord, etc) and authorize these persons to disclose information on me/us to the Landlord or his agent.

Tenant Signature

Date

Tenant Signature

Date