

APPLICATION TO RENT

TURNER, MEAKIN MGMT. CO. LTD.

PROPERTY # _____

Rental Address: _____	Unit #: _____
Commencement Date (Proposed): _____	Parking Space #: _____
Term: Monthly <input type="checkbox"/> Yearly: <input type="checkbox"/>	
Rent: \$ _____	Security Deposit (One Half Months Rent): \$ _____

	First Name	Middle initial	Last Name	Age
Applicant's Full Name	_____	_____	_____	_____
Spouse's Name	_____	_____	_____	_____
Other's Name	_____	_____	_____	_____
Other's Name	_____	_____	_____	_____
Total Number of Occupants	_____ (If more than occupant, please attach a separate and completed application)			

*NOTE: APPLICATIONS NOT ACCEPTED FROM INDIVIDUALS OWNING OR HARBOURING ANIMALS OR FROM SMOKERS.

	Telephone Number	How Long
Applicant's Present Address	_____	_____
Applicant's Former Address	_____	_____
Present Landlord's Name and Address	_____	_____
Present Employment Occupation:	_____	_____

Bank Reference (**MUST Include Bank Name and Branch)	_____	_____	_____
Other References	_____	_____	_____
(Please give two credit references and two personal local references not related)	1. _____	_____	_____
	2. _____	_____	_____

Birthdate:	_____ / _____ / _____ (dd/mm/yy)
Drivers license Number:	_____
Social Insurance Number:	_____
Present Gross Earnings of Applicant per month:	\$ _____
Present rental rate	\$ _____

Person to notify in case of emergency: - Name _____		
Address _____	Telephone _____	Relationship _____
Description of Vehicles Used by Occupants:		
Make _____	Model _____	License No. _____
Make _____	Model _____	License No. _____

Applicant certifies that all statements given herein are true and correct, and hereby authorizes Turner, Meakin Management Co. Ltd. to contact any references given herein and to obtain such credit reports or other information as be deemed necessary. It is further understood that all information given herein remains confidential and will not be released to anyone other than lawful authorities without prior consent of applicant. This consent is given pursuant to Chapter 78, Section 12 of the Credit Reporting Act, RSBC, 1979.

Applicant understands that no representations, promises or agreements as to occupancy, lease or date of possession have been made.

Turner, Meakin Management Co. Ltd. has the right to reject this application and return the deposit at any time within five working days after date of application. Such notice will be directed to the address of the applicant as stated above. If notice of rejection is not given within that time the application shall be deemed by both parties to have been accepted. A service charge of \$100.00 will be deducted from the deposit received if the applicant wishes to cancel this application and rental offer prior to the five-day period.

The Tenant acknowledges and agrees that if the agent of the Landlord receives a security deposit on behalf of the Landlord from the Tenant, the agent is not a stakeholder of the security deposit and may release it in accordance with the instructions of the Landlord. In the event that the security deposit is so released, the Landlord will be responsible for returning the security deposit and accumulated interest to the Tenant in accordance with the provisions of the *Residential Tenancy Act*.

The owners, their representatives or duly authorized agents shall not be liable for any loss or damage occurring due to inability to deliver possession of the premises applies for. If applicant withdraws this application, or upon acceptance does not take occupancy of the premises, any sums deposited will be retained by the owner as liquidated damages, and the applicant shall not acquire any right in or to said premises by reason thereof.

I/WE, the applicant(s), hereby acknowledge that Turner Meakin Management Co. Ltd., is agent and property manager for the Owner/Landlord only.

Applicant's Signature	_____
Date:	_____ (dd/mm/yy)
Co-Applicant's Signature	_____
Date:	_____ (dd/mm/yy)

Turner, Meakin Management Co. Ltd. hereby acknowledges receipt of the security deposit on behalf of the owner.

Turner, Meakin Management Company Ltd.

Per:	_____
Date:	_____ (dd/mm/yy)

PLEASE FAX TO TURNER, MEAKIN MANAGEMENT COMPANY LTD. AT 604-736-8566