BONA PROPERTIES RENTAL APPLICATION

Beginning on the o	of, 20	eated at 1396) For	Ogilvie Road. Apartment number or a period of 12 months OR 12.5 mon	
At a monthly rent of \$	·		Year/Month/Day	
Name of Applicant:		D O R		
Driver's License:			S I N·	
Doytimo Phonos		Evoning Phone		
Email:				
Starting with your current Address		-	resses going back to maximum of 7 y Landlord's Name & Tel. No	
Written confirmation of all e	employment/income inf	formation is re	equired before approval of application.	
Present Employer:	Contact		Tel:	
Position	Salary		Start Date?	
Other Income	Administrator:		Tel:	
Bank Name and Branch:	Contact:		Acct .No:	
Other applications attache	ed? Yes No	If ves, ho	ow many?	
List of other Occupants &		,	•	
Year, Make, Model & Co	lor of Auto:		License Plate:	
Have you ever filed for bar How many evictions have How many animals do you	been filed or comme	nced on you be?	Discharge Date:	
2 Personal References:	Address:		Telephone:	
~		,	uilding emergencies, floods, fires etc.	
Next of Kin:	Relation:		Telephone:	

I agree to pay for the following service	es:		
□ Electricity/Hydro	_		
☐ Indoor parking @ \$70.00 pc			
□ Covered Parking @\$60.00 pe			
□ Outdoor parking @ \$50.00 pc			
		availability and not guaranteed.	
I/We enclose a deposit in the form of	Debit, Money Order,	Bank Draft, or Certified Funds	
Last Month's	Rent \$sit \$	- (0.1.16	
Remote Depos	sit \$	(Only if required)	
Total Deposit	Ψ	_	
I/ we provide payment for the following	ng on or before	when keys are released:	
First Month's	Kent \$	(Only if required)	
Total	parking 5	(Only if required)	
	 a the final sum required	, it is possible that you will be asked to provide us with	
		rovided in Certified Funds, Money Order or Bank Draft.	
		Certified Funds, Money Order or Bank Draft. NO CASH –	
NO EXCEPTIONS. Picture Identification m			
		n four business days from date of refusal. Management	
*		s Commission. Among qualities reviewed, but not limite	d
		ory, reference reviews, completeness of application and	
information within, income information and a	ny other information t	hat the Landlord may find pertinent at the time of	
		onally misrepresents the tenant will be reason for	
disqualification and/or future consideration.	•	•	
It is the policy of Boncon Properties, th	at should an application	n be refused, Management will not provide specific	
reasons for the decision.			
All or part of the deposit may be forfeit	ed to cover expenses is	avolved to process my application, and if necessary,	
finding another tenant, if the apartment is refu	ised by applicant after	verification has taken place.	
		idlord and be in possession of tenants insurance.	
		e building. There shall not be any smoking within 9 mete	rs/
		ansitioning to a smoke-free building and that until the	
		mitted in the 'grandfathered' units of the building.	
		r assignees to exchange my personal information on an	
		verify your personal information in order to protect me,	
		y of the credit granting system and to co-operate with	
		wful or improper activities in order to protect you and me	
		al credit information report related to this application and	d
to verify directly the information you have su			
		oviding my contact information to Rogers Cable to allow	
		et name and telephone number along with lease start date	
and apartment number will be the only inform			
		roviding my contact information to Wyse Meter Solution	IS
to allow the set-up of the hydro account for the	e rental unit.		
D	1' 4 6'		
Date: Ap	plicant's Signature:		
For Office Use Only:	Approved or Refus	ed	
I acce mama(a).			
Lease name(s):	(a a a a a d d - 4 - 1	Total Lease term:	
Lease start date:	_ease end date:	10tat Lease term:	
EMD. ¢	Le	ase obligation: \$	
Doto:	LNIK: \		
Date: Total	cerunea runas aue:		

Authorized and verified by: ____