

East St. Paul, MB, R2E 0M9

T: 204 996 0399

Rental Unit

E: tamara.canning@tamcana.com

Application for Residency

Address	s:									
Possess	sion Date:									
Appli	cant Inf	ormation								
Name:										
Date of birth:				SIN:	SIN:			Drivers Licence No:		
Email:							•			
Resid	dential I	nformation								
Current	Address:									
City:				Provinc	Province:			Postal Code:		
Own	Rent	(Please circle)		Monthly	y payment or rent:		How long	?		
Landlor	ds name:						Phone:			
Previou	s address:									
City:				Provinc	Province:			Postal Code:		
Own	Own Rent (Please circle)			Monthly	Monthly payment or rent:			How long?		
Previous landlords name: Phone:										
Previou	s address:									
City:	City:			Provinc	Province:			Postal Code:		
Own	Own Rent (Please circle)			Monthly	Monthly payment or rent:			How long?		
Previous landlords name:					Phone					
Empl	oyment	Information (F	Please	attach lette	er of Employme	ent from Cur	rent Employe	r)		
Current	Employer:									
Employer address:								How long?		
City: Pr			Province:	Province: Posta			ode:			
Phone: E-			E-mail:	-mail:						
Position	ո:		Hourly	Salary	(Please circle)		Annual income):		
Previou	s Employe	r:								
Employer address:								How long?		
City:	City: Pr			Province:	ovince:			Postal Code:		
Position	າ:	-	Hourly	Salary	(Please circle)		Annual income):		

Emergency Co	ontact								
Name of a person no	ot residing with you	:							
Address:									
City:			Province:			Postal Cod	de:		
Phone:		Email:				Relationsh	ip:		
References									
Name:		Addres	SS:				Phone:		
Co-Applicant I	Information,	if Rec	uired						
Name:			•						
Date of birth:			SIN:			Drivers Lic	ence No:		
Email:			l .			1			
Residential In	formation								
Current Address:									
City:			Provin	ce:		Postal Cod	Postal Code:		
Own Rent	(Please circle)		Month	ly payment or rent:		How long?			
Previous landlords na	ame:		•			Phone:			
Previous Address:									
City:	City:			Province:			Postal Code:		
Own Rent (Please circle)			Month	Monthly payment or rent:			How long?		
Previous landlords na	ame:					Phone:	Phone:		
Previous Address:									
City:			Provin	ce:		Postal Cod	Postal Code:		
Own Rent (Please circle)			Month	ly payment or rent:			How long?		
Previous landlords na						Phone:			
Employment I	nformation (F	Please	attach lett	er of Employme	ent from Curi	rent Employer)			
Current Employer:									
Employer address:							How long?		
City: Pr			Province:			Postal Cod	le:		
Phone: E-			E-mail:						
Position:		Hourly	Salary	(Please circle)		Annual income:			
Previous Employer:									
Employer address:		I				1	How long?		
City:			Province:			Postal Cod	le:		
Position:		Hourly	Salary	(Please circle)		Annual income:			
Emergency Co									
Name of a person no	ot residing with you	:							
Address:		1							
			Province:			Postal Cod			
Phone: Email:						Relationsh	ip:		
References									
Name: Address:			ss:				Phone:		

How did you hear about us? (Optional) (Please circle)						
Kijiji	Renters Guide	Sign in front of building				
Other: (Please Explain)						

I/We hereby declare that the foregoing information is true and complete.

I/We agree to allow Tamcana Properties to do a credit check and personal investigation. I/We voluntarily give consent to Tamcana Properties to obtain personal information such as address, contact information or other personal information from our Employer or from the vehicle registration information centre records maintained by the registrar of motor vehicles from the date of this application until all outstanding monies due to Tamcana Properties have been paid in full.

Application to lease these premises is subject to the approval and acceptance of Tamcana Properties and the signing of a lease agreement and when so accepted, binds the applicant and Tamcana Properties to the contract of tenancy.

The Tenant agrees to comply with the rules set out in the lease agreement and all amendments therein.

Tamcana Properties agrees to maintain the information in this application in strict confidence and will not disclose any personal information to any third party except as detailed in Tamcana Properties Privacy Code.

DATED THIS	DAY OF	20
Signature of Applicant		Signature of Co-Applicant
Signature of Witness		Signature of Witness
Name of Witness		Name of Witness
Address of Witness		Address of Witness
We hereby accept the above application.		
DATED THIS	DAY OF	20
Tamara Canning		Name

Operating as Tamcana Properties