ARCA Property Management
79 Bridge Street Unit C4
P.O. Box #1354
Almonte, ON
K0A 1A0

Landlord's Name: **ARCA Property Management Inc.**
(Hereinafter referred to as (" Landlord")

I hereby make application to rent, the premises located at Street No. & Name: _____ Apt. _____,
(Hereinafter referred to as "Premises")

City _____ Prov/State _____ Post/Zip Code _____, beginning on the _____ day of

the month of _____, 20_____. For a period of _____, at a monthly rent of $_____

Applicant's Particulars

_____|_____|_____|_____
First M. Init Last Name SIN: (Optional)

Email Address: _____ @ _____

D.O.B. _____ Daytime Tel. No. (_____)_____ Evening Tel. No. (_____)_____
yyyy/mm/dd

Starting with your current address list at least 1 prior address going back to a maximum of 7 years.
Unit # Str# Str. Name City Postal Code No. of Years Landlord's Name Landlord's Telephone Number
(1) _____
(2) _____

Drivers License No: _____ Make of Vehicle: _____ Year: _____ Plate No: _____
Employer's Name: _____ No. of Yrs._____ Field of Employment: _____ No. of Yrs_____
Address: _____ Bus. Tel No. (_____)_____
Previous Employer: _____No. of Yrs._____ Bus. Tel No. (_____)_____
Bank Name and Branch: _____Bank Tel No. (_____)_____
Annual Income from all sources: $_____ Credit Card Type: _____
Have you ever declared bankruptcy, or been a party to a Landlord and Tenant Court Action? Yes ☐ No ☐
Lease Term Completed? Yes ☐ No ☐ Rent Paid on time? Yes ☐ No ☐ All Cheques honoured by bank? Yes ☐ No ☐
Sufficient notice to move given? Yes ☐ No ☐ Rental left in good condition? Yes ☐ No ☐

SPOUSE AND/OR OCCUPANTS (Complete separate Application for Spouse or other Person who is to be Co-tenant)
Person(s) who intend to occupy the Premises in addition to the Applicant:
(1) Name: _____ Relationship to Applicant: _____ Age _____
(2) Name: _____ Relationship to Applicant: _____ Age _____
(3) Name: _____ Relationship to Applicant: _____ Age _____

REFERENCES (Not Family members. Must be completed with full First then Last Name)
Name Address Telephone Name Telephone
(1) _____
(2) _____

In case of Emergency: Contact Name: _____ Relationship: _____
Telephone Numbers : During the day: (_____)_____ In the evening: (_____)_____

Pets
Yes ☐ No ☐ Plan on getting pets
If yes, number of pets ____ and are they spayed and/or neutred? Yes ☐ No ☐
Age_____ Breed/Type_____
Age_____ Breed/Type_____
Upon final acceptance of your application and before a lease is signed, proof from a veterinarian must be provided stating that each pet has been spayed and/or neutred. As well your pets must not interfere with the reasonable enjoyment of the other tenants or cause damage to the apartment.

ARCA Property Management
79 Bridge Street Unit C4
P.O. Box #1354
Almonte, ON
K0A 1A0

*Information***

The word **"Information"** means credit information, personal information, information about the services you use that are provided by **the Landlord** listed in Part (C) and/or (D) below and information relating to your tenancy at **the Premises applied for in this application** including information regarding the duration of your tenancy, monthly rent, emergency contacts and any matters relating to your lease/tenancy agreement, including misrepresentations relating to, defaults under and/or breaches of your lease/tenancy agreement.
"Credit Information" means information about you, including your name, age, date of birth, occupation, place of residence, previous places of residence, occupancy length, marital status, co-occupant's/spouse's/same-sex partner's name and age, number of dependants, particulars of education or professional qualifications, places of employment, previous places of employment, employment duration, estimated income, paying habits, outstanding debt obligations, cost of living obligations, involvement in bankruptcy proceedings or landlord and tenant disputes, assets, and banking information (including account and credit card information).
"Personal Information" means information about you other than credit information that is relevant to your suitability as a tenant, including your social insurance number (optional), driver's license number, vehicle license plate number, vehicle make and year, and information from references which you provide about your character, reputation, physical or personal characteristics or mode of living or about any other matter concerning you that is relevant to your suitability as a tenant.

Collection, Use and Disclosure of Information:

In consideration for **the Landlord** accepting you as a tenant and entering into a lease/tenancy agreement with you, you expressly consent to and authorize the following:

1. **the Landlord** may obtain Information about you through a tenant check and/or credit or consumer report conducted by ***Rent Check Credit Bureau*** and as permitted or required by law. You expressly authorize ***Rent Check Credit Bureau*** to provide Information regarding you to **the Landlord**.
2. **the Landlord** may use Information about you to determine your suitability as a tenant and as permitted or required by law.
3. **the Landlord** may disclose Information about you as permitted or required by law and to ***Rent Check Credit Bureau*** in order to be included within a database of tenant information, and/or within a file on you, for purposes of:
   - tenant reporting and credit reporting in accordance with the *Consumer Reporting Act* (Ontario);
   - establishing a credit history and a rental history;
   - comparing with aggregate statistical data for purposes of tenancy and credit scoring; and
   - supporting the credit approval process.
4. You expressly authorize ***Rent Check Credit Bureau*** to retain Information regarding you indefinitely for the purposes outlined in section 3 above, subject to any applicable legal restrictions.
5. You expressly authorize ***Rent Check Credit Bureau*** to disclose Information regarding you to its members and subscribers as required or permitted by law and for the purposes outlined in section 3 above.
6. You agree that you will not withdraw your authorization and consent to the collection, use and disclosure of Information about you by ***Rent Check Credit Bureau*** as outlined in sections 1 to 5 above.
7. You agree that all statements on this Residential Rental Application are true and you expressly authorize all references given to release information about you to **the Landlord** for verification subject to sections 1 to 5.

The undersigned applicant hereby confirms the ***" Information"*** set out on page 1 and 2 of this Application.

Applicant to complete:

Please provide your consent by checking the following box and signing in the appropriate space below.

☐ **Yes, I have read, understood and voluntarily agree to the terms and conditions, and the collection use and disclosure of Information as outlined above.**

_____ **X** _____ **X**
Applicant's Signature Print Name

_____/_____/_____ **X**
Date: (yyyy / mm / dd)

Landlord to complete: (Landlord to sign once Applicant is accepted as a Resident)

_____ _____/_____/_____
Landlord's Signature Date: (yyyy / mm / dd))

(Telephone): (613) 256-4309
(Facsimile): (613) 256-4309
www.arcapm.com

ARCA Property Management
79 Bridge Street Unit C4
P.O. Box #1354
Almonte, ON
K0A 1A0

ARCA Property Management (The "Landlord")

Consent Under the
*Personal Information Protection and Electronic Documents Act (*PIPEDA)

Your Information

Surname:_____ First Name: _____
(the "Applicant")

Consent

1. **The Applicant consents to the disclosure of his or her personal information related to rental payments, rule violations, defaults under his or her lease, and complaint history (the "Tenancy Information") while living in leased premises owned or operated by any of the Applicant's current or former landlords ("References"). Consent to disclose the tenancy Information to the Landlord is for the purpose of the Landlord assessing the Applicant's suitability to be a tenant in a building owned or operated by the Landlord.**
   (the "Tenancy Suitability Assessment).

2. **The Applicant consents to the disclosure of his or her personal information by any of his or her current employers concerning:**
   a. **Verification that the Applicant is employed by the Employer;**
   b. **The length of time the Applicant has been employed by the Employer; and**
   c. **The Applicant's salary from the employer;**

   (the "Employment Information") for the purpose of the Tenancy Suitability Assessment.)

3. **The Applicant consents to the use and disclosure of this form by the Landlord to Referees and Employers in order to provide proof to them that the Applicant's Tenancy Information or Employment Information, as applicable, may be disclosed by them, to the Landlord.**

4. **The Applicant Consents to the Landlord's collection of his or her Tenancy Information from any Referee; and Employment Information from any Employer; for the purpose of the Tenancy Suitability Assessment.**

_____	_____	_____
Witness	**Applicant's Signature**	**Date: day/month/year**

(Telephone): (613) 256-4309
(Facsimile): (613) 256-4309
www.arcapm.com