



**ASSOCIATED PROPERTY MANAGEMENT (2001) LTD.**

Return this form in person or by fax to: **250-712-2265**

#1 – 1441 St. Paul Street  
Kelowna, B.C. V1Y 2E4  
Phone: (250)-712-0025  
Toll Free 1-877-612-0025

PROPERTY MANAGER: \_\_\_\_\_  
OR Property Code: \_\_\_\_\_

**WWW.apmkelowna.com**

**AGENCY DISCLOSURE & OFFER TO RENT**

**You MUST complete and SIGN ALL FORMS**

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 \_\_\_\_\_ B.C.

At a rental rate of \$\_\_\_\_\_ per month  utilities included  extra Occupancy date: \_\_\_\_\_

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

**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. \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

RELATIONSHIP OF PARTIES:  Room Mates  Boyfriend/Girlfriend  Spouse  Family Member  Details: \_\_\_\_\_

*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?: Yes No LANDLORD'S PHONE: \_\_\_\_\_ FAMILY?: Yes No

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON LEAVING: \_\_\_\_\_ REASON LEAVING: \_\_\_\_\_

STYLE: Hse Twnhse Apt Suite Dplx Shared RENT:\$ \_\_\_\_\_ STYLE: Hse Twnhse Apt Suite Dplx Share RENT:\$ \_\_\_\_\_

Breaking A Lease?  Gave proper notice to Landlord?  Breaking A Lease?  Gave proper notice to Landlord?

PREV. ADDRESS: \_\_\_\_\_ PREV. ADDRESS: \_\_\_\_\_

LANDLORD NAME: \_\_\_\_\_ LANDLORD NAME: \_\_\_\_\_

LANDLORD'S PHONE: \_\_\_\_\_ FAMILY?: Yes No LANDLORD'S PHONE: \_\_\_\_\_ FAMILY?: Yes No

FROM: \_\_\_\_\_ TO: \_\_\_\_\_ FROM: \_\_\_\_\_ TO: \_\_\_\_\_

REASON LEFT: \_\_\_\_\_ REASON LEFT: \_\_\_\_\_

STYLE: Hse Twnhse Apt Bsmt Upper Dplx RENT: \$ \_\_\_\_\_ STYLE: Hse Twnhse Apt Bsmt Upper Dplx RENT: \$ \_\_\_\_\_

Security Deposit Returned in Full? Yes No

Security Deposit Returned in Full? Yes No

OCCUPATION / PRGRM: \_\_\_\_\_ OCCUPATION / PRGRM: \_\_\_\_\_

COMPANY/SCHOOL: \_\_\_\_\_ COMPANY/SCHOOL: \_\_\_\_\_

LENGTH/EMPLOY: \_\_\_\_\_ FAMILY?: Yes No LENGTH/EMPLOY: \_\_\_\_\_ FAMILY?: Yes No

CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_ CONTACT: \_\_\_\_\_ PHONE: \_\_\_\_\_

MONTHLY NET INCOME: \$ \_\_\_\_\_ Hrs/Wk: \_\_\_\_\_ MONTHLY NET INCOME: \$ \_\_\_\_\_ Hrs/Wk: \_\_\_\_\_

SEASONAL POSITION? Yes No SEASONAL POSITION? Yes No

SIN: \_\_\_\_\_ SIN: \_\_\_\_\_

BIRTH DATE: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_

EMERGENCY CONTACT: \_\_\_\_\_ EMERGENCY CONTACT: \_\_\_\_\_

RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_ PHONE: \_\_\_\_\_

PETS: Yes No Type: \_\_\_\_\_ SMOKER?: Yes No PETS: Yes No Type: \_\_\_\_\_ SMOKER?: Yes No

HAVE YOU EVER BEEN EVICTED? Yes No HAVE YOU EVER BEEN EVICTED? Yes No

DO YOU HAVE A CRIMINAL RECORD? Yes No DO YOU HAVE A CRIMINAL RECORD? Yes 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) and authorize these persons to disclose information on me/us to the Landlord or his agent.

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date