

## CO-SIGNER APPLICATION FOR RESIDENCY

BUILDING NAME: \_\_\_\_\_

I/We offer to rent from the lessor (suite no.) \_\_\_\_\_ (bldg. address) \_\_\_\_\_

Date of Possession \_\_\_\_\_

| FOR OFFICE USE ONLY   | Schedule A         | Schedule B         | Schedule C         |
|-----------------------|--------------------|--------------------|--------------------|
| Lease from _____      | To _____           | To _____           | To _____           |
| For the premises      | \$ _____ per month | \$ _____ per month | \$ _____ per month |
| For Parking space(s)  | \$ _____ per month | \$ _____ per month | \$ _____ per month |
| Other (specify) _____ | \$ _____ per month | \$ _____ per month | \$ _____ per month |
| A total of            | \$ _____ per month | \$ _____ per month | \$ _____ per month |

**Rent is payable on or before the first of each month. For your convenience and safety, we offer three (3) options for payment: Pre-authorized automatic debit, post-dated cheques and an Interac payment terminal located at 346 Broadway.**

Smoking is not permitted Satellite dishes are not permitted Waterbeds are not permitted Pets are not permitted Electronics may not be wall mounted

PLEASE PRINT

(THE FOLLOWING INFORMATION IS STRICTLY CONFIDENTIAL)

Name of applicant(s) you are co-signer for: \_\_\_\_\_

Mr.  Mrs.  Ms.

First Name of Co-Signer: \_\_\_\_\_ Last Name of Co-Signer: \_\_\_\_\_

Birth Date: \_\_\_\_\_ S.I.N \_\_\_\_\_ Driver's Licence No. \_\_\_\_\_

Email Address: \_\_\_\_\_

Present Address: \_\_\_\_\_ City/Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

How Long (years)? \_\_\_\_\_ Phone (home): \_\_\_\_\_ Phone (cell): \_\_\_\_\_

Present Property Manager's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Previous Address: \_\_\_\_\_ How Long (years)? \_\_\_\_\_

Previous Landlords Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Employer: \_\_\_\_\_ How Long (years)? \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Occupation: \_\_\_\_\_ Present Annual Income: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ How Long (years)? \_\_\_\_\_ Phone: \_\_\_\_\_

Person to Notify in Emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

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By checking the box below you have read, understand and are bound by the terms of our application.

I/We hereby declare that the foregoing is true and complete. I/We agree to allow **AKMAN MANAGEMENT LTD.** to do a credit check and personal investigation. I/We voluntarily give consent to **AKMAN MANAGEMENT LTD.** to obtain personal information such as address or other personal information 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 **AKMAN MANAGEMENT LTD.** have been paid in full. Application to lease these premises is subject to the approval and acceptance of **AKMAN MANAGEMENT LTD.** and when so accepted, binds the applicant and **AKMAN MANAGEMENT LTD.** to the contract of tenancy. If the applicant withdraws this application or fails to execute the lease upon request of the lessor, any sums deposited will be retained by the lessor as liquidated damages, and the applicant shall not acquire any right in or to said premises. Tenants will be required to sign a term lease prior to occupancy at the office of the lessor or agent, and agrees to comply with the rules set out in the lease and all amendments therein.

**Letter of employment, with proof of income, and security deposit, are required to process this application.**

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D.20 \_\_\_\_\_

\_\_\_\_\_  
Authorizing Initials of Co-Signer

**We hereby accept the above Application.**

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ A.D.20 \_\_\_\_\_

per: \_\_\_\_\_  
Agent for Owner

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**FOR OFFICE USE ONLY:**

Security Deposit Amount: \_\_\_\_\_ Debit \_\_\_\_\_ or Cheque. \_\_\_\_\_

Received By: \_\_\_\_\_ Date Received: \_\_\_\_\_

## CO-SIGNER PERSONAL INFORMATION CONSENT

Akman Management Ltd. ("Akman"), either acting in its own capacity as landlord or acting as property manager, may collect personal information about you, including credit and other financially related information ("Personal Information"). The Personal Information may be collected from you, your past and present employers, third party credit bureaus and financial institutions and the references you have provided.

Akman will give your personal information to credit bureaus and financial institutions. Where Akman is acting in a property management capacity, all Personal Information will also be provided to the landlord. Where ownership of the leased premises changes or where Akman is no longer the property manager, Akman will provide your Personal Information to the successor owner or new property manager to carry out the purpose set forth in this Consent.

Akman will use your Personal Information for the following purposes:

- (a) Your Personal Information will be used to assess your financial situation to determine whether it wishes to offer products or services to you;
- (b) Your social insurance number is used for file matching purposes to identify you with credit bureaus and financial institutions for credit history; and
- (c) Your Personal information is used for any purpose related to the provision of products and services you receive from Akman, including the rental of premises, the provision of all services associated with your tenancy and collection of unpaid accounts.

Please see our Privacy Code which outlines in greater detail Akman's policy relating to your Personal Information. A copy of the Privacy Code may be obtained by contacting us as follows:

346 Broadway  
Winnipeg, Manitoba  
R3C 0T2

Attention: Privacy Officer

By checking the box below you have read, understand and give consent for Akman Management Ltd. to collect personal information.

I/We hereby consent to the use of my/our Personal Information in the manner set forth in this Consent.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Name of Co-Signer

\_\_\_\_\_  
Authorizing Initials of Co-Signer