

Thank you for your interest in renting one of our properties from RE/MAX Platinum Realty - Cold Lake.

To quickly get you in your new home, we just need to gather a bit of confidential information from you so we can approve and process your application as efficiently as possible.

**In addition to completing the attached Residential Rental Application, please provide the following information via email to [rentals@remaxplatinum.realestate](mailto:rentals@remaxplatinum.realestate).**

A copy of the below documents for both the Applicant and Co-Applicant's (if applicable)

- ☐ Driver's License
- ☐ Proof of Employment
  - Letter of Employment,
  - The last two most recent pay stubs and/or
  - A copy of your last two months of bank statements showing the direct deposit payroll from your employer(s).
- ☐ A Criminal Record Check, this can be done by visiting or contacting your local RCMP Detachment  
or  
Through an online service such as the Commissionaires Office of Canada  
<https://commissionaires.ca/en/national/service/criminal-record-checks>
- ☐ A security deposit will be required of a minimum of \$1000.00 to hold a property during the application process.  
Please e-transfer the agreed upon amount to [deposits@remaxplatinum.realestate](mailto:deposits@remaxplatinum.realestate), using the security answer/password **Remax101**, and please enter the Rental Property address in the "Message Box."

If you have any question, please connect with me at our office through my preferred contact email of [rentals@remaxplatinum.realestate](mailto:rentals@remaxplatinum.realestate) or give me a call at 780-661-7653 Ext 2.

Thank you again for choosing RE/MAX Platinum Realty. We look forward to helping you and your family get settled in your new home.

Best regards,

Leasing Co-Ordinator



## **RESIDENTIAL RENTAL APPLICATION**

For inquiries about the rental property, please contact RE/MAX Platinum Realty at:

Email Address: [rentals@remaxplatinum.realestate](mailto:rentals@remaxplatinum.realestate)

Phone: (780) 661-7653 Ext 2

### **RENTAL PROPERTY**

Rental Property Address: \_\_\_\_\_, Cold Lake, AB \_\_

Date of Availability: \_\_\_\_\_

Type of Lease Term: \_\_\_\_\_

Minimum Term of Lease: \_\_\_\_\_

Monthly Rent Payment: \$ \_\_\_\_\_

Initial Security Deposit: \$ \_\_\_\_\_

Realtor who showed the property: \_\_\_\_\_

### **APPLICANT'S PERSONAL INFORMATION**

Name: \_\_\_\_\_

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

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Insurance Number: \_\_\_\_\_

DESIRED MOVE-IN DATE: \_\_\_\_\_

### **CO-APPLICANT'S PERSONAL INFORMATION *(if applicable)***

Name: \_\_\_\_\_

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

Home Phone: (\_\_\_\_\_) \_\_\_\_\_ Alternative Phone: (\_\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Social Insurance Number: \_\_\_\_\_

### **OTHER OCCUPANTS' INFORMATION *(if applicable)***

Name: \_\_\_\_\_

Relation to Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Name: \_\_\_\_\_

Relation to Applicant: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

## RENTAL HISTORY

### I. Current Residence

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

How long have you been residing at this address? \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_

Landlord's Contact Number: \_\_\_\_\_

Reason(s) for leaving this property: \_\_\_\_\_

\_\_\_\_\_

### II. Previous Residence *(If applicable)*

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

How long did you stay at this address? \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

Landlord's Name: \_\_\_\_\_

Landlord's Contact Number: \_\_\_\_\_

Reason(s) for leaving this property: \_\_\_\_\_

\_\_\_\_\_

Have you ever been evicted from a rental residence?	Yes	No
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Have you missed two or more rental payments in the past 12 months?	Yes	No
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Have you ever refused to pay rent when due?	Yes	No
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If you have answered YES to any of the above, please state your reasons and/or circumstances:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT DETAILS

### I. Current Employment

Employment Status: ☐ Full-Time ☐ Part-time ☐ Student ☐ Unemployed ☐ Retired

Current Employer: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_

Date Hired: \_\_\_\_\_

Monthly Income:\$ \_\_\_\_\_

Other Sources of Income:

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### II. Previous Employment

Previous Employer (if any): \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_

Period of Employment: \_\_\_\_\_

## PROOF OF INCOME

The applicant is required to attach proof of their income to this rental application form. Acceptable documentation includes pay stubs, employer's letter/certificate, bank statements or copies of the previous year's tax return.

## CREDIT HISTORY AND BACKGROUND CHECK AUTHORIZATION

Have you declared bankruptcy in the past seven (7) years?                      Yes      No  
Do you consent to a credit check?    Yes      No  
Is there anything that we may find in our **credit** check that you want to comment on?

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## CRIMINAL BACKGROUND CHECK AUTHORIZATION

Do you consent to a criminal check?    Yes      No  
Is there anything that we may find in our **criminal** check that you want to comment on?

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## ADDITIONAL INFORMATION

### I. PETS

The Landlord allows pets in the rental property, with the following restrictions:

- a. The Landlord requires a pet fee in the amount of \$25.00/month/pet.

Do you own a pet?    Yes      No

If YES, please describe the pet below, a photo of the pet(s) must be emailed to  
rentals@remaxplatinum.realestate :

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## II. SMOKING

The Landlord does not allow smoking of cigarettes or vaping in the rental property.

The Landlord does not allow smoking, vaping, cooking, baking, or any use of marijuana in any form in the rental property.

## III. WATERBEDS

The Landlord does not allow the use of waterbeds on the premises.

## IV. PARKING

The rental property includes\_\_\_\_parking space(s) for the tenant's use.

Will you bring a vehicle?

Yes    No

I declare that the information I have provided is true and correct and contains no misrepresentations. If misrepresentations are found after a residential lease agreement is entered into between the Landlord and Applicant, the Landlord shall have the option to terminate the residential lease agreement and seek all available remedies.

The Applicant authorizes the Landlord to verify all references and facts, including but not limited to current and previous landlords, employers, and personal references. The Applicant understands that incomplete or incorrect information provided in the application may cause a delay in processing or may result in the denial of application.

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Co-Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

## Holding Deposit

Move-In Date:  
Applicant's Name:  
Phone:

The applicant agrees to rent housing accommodation located at:

The applicant is paying a holding deposit of \$\_\_\_\_\_.

This holding deposit shall be applied toward the tenant's security deposit after the application process is complete and the prospect is approved for tenancy. In the event the application for tenancy is not approved or if the property is not ready on the scheduled move in date, the deposit will be returned to the applicant. If the applicant signs the rental agreement but fails to provide additional funds that are required for occupancy, or does not take occupancy on the scheduled move-in-date, all of the holding deposit will be retained by the owner.

Date: \_\_\_\_\_ Monies Received: \$ \_\_\_\_\_ Payment Type: \_\_\_\_\_

### SCREENING DISCLOSURE

- 1. Disclosure.** The owner/manager intends to investigate the information that you have set forth on your application. This may include obtaining a credit report or other report from a credit bureau or tenant screening service confirming information that you set forth in your application. The landlord may also contact prior landlords, employers, financial institutions, and personal references.
- 2. Applicant Rights.** You have the right to dispute the accuracy of the information provided by the tenant screening service, credit bureau, or the entities listed on your application who will be contacted for information about you.
- 3. Copy Received.** By signing below, the applicant acknowledges the holding deposit procedure and has received a copy of this notice.

Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Applicant \_\_\_\_\_ Date: \_\_\_\_\_

Manager \_\_\_\_\_ Date: \_\_\_\_\_

# RE/MAX Platinum Realty PRE-AUTHORIZED DEBIT (PAD) AGREEMENT

## Payor – Account holder name and account number

Name(s) on account	Account Number with Payee	Telephone No.
Address (street, city, province)	Postal code	Email
Name of Financial Institution	Institution No.	Transit No.
		Account No.

## Payee – Contact information

Name of organization RE/MAX Platinum Realty	Contact name Carlene	Telephone No. 780-661-7653 Ext 4
Address (street, city, province) 5314 55st Cold Lake, Alberta	Postal Code T9M 1R3	Email finance@remaxplatinum.realestate

## Withdrawal authorization

I, the undersigned, (if a legal person, herein represented by its duly authorized representative(s)), authorize the Payee to make pre-authorized debits (PAD) from my account with the aforementioned financial institution, at the following interval:

Weekly (date): \_\_\_\_\_ Every 2 weeks (start date): \_\_\_\_\_ Twice monthly (dates): \_\_\_\_\_ X Monthly (on the 1st day)

☐ other (specify the time or event that defines the interval):

Each withdrawal will correspond to:

☒ a fixed amount of \$ \_\_\_\_\_, which may be increased without any further authorization on my part, provided that the Payee notifies me in writing at least 10 days before the due date of the payment as modified.

These services are for: ☐ personal use, or ☐ business use

**Waiver: I have received a copy of this Agreement and waive the 10 days' notice before the first payment.**

### Change or cancellation:

I shall inform the Payee, in a timely manner, of any changes to this Agreement.

I retain the right to revoke my authorization at any time, with a pre-notification of 30 calendar days. To obtain a sample of the cancellation form or for more information on my right to cancel a PAD Agreement, I may contact my financial institution or visit the Canadian Payments Association Web site at [www.payments.ca](http://www.payments.ca). I agree to release the financial institution of any liability if the revocation is not respected, except in the case of gross negligence on its part.

I agree that the financial institution at which I maintain the account is not required to verify that the payment is debited in accordance with this authorization. I also certify that every person whose signature is required for the operation of the aforementioned account has signed this authorization.

I acknowledge that the delivery of this authorization to the Payee constitutes delivery by me to the aforementioned financial institution.

## Reimbursement

I have certain rights of recourse if a debit does not comply with the terms of this Agreement. For example, I have the right to receive reimbursement for any PAD that is not authorized or that is not compatible with the terms of this PAD Agreement. For more information on my rights of recourse, I may contact my financial institution or visit [www.payments.ca](http://www.payments.ca)

The financial institution shall reimburse me, on behalf of the organization, for any amounts withdrawn in error, within 90 calendar days of the withdrawal for a Personal PAD and within 10 business days for a Business PAD, provided that the reimbursement is claimed for a valid reason.

I understand that a claim to this effect must be made to my financial institution following the procedure it will provide for that purpose.

Finally, I acknowledge that a claim for reimbursement filed after the aforementioned time limits must be settled between me and Payee, without any liability or commitment on the part of my financial institution.

## Consent to disclosure of information

I hereby consent to the disclosure of the information contained in my pre-authorized debit enrolment agreement to the financial institution, provided such information is directly related to and required for the smooth application of the rules governing pre-authorized debits.

## Signature of account holder(s)

Signature of account holder \_\_\_\_\_ Print Name \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_

Signature of second account holder \_\_\_\_\_ Print Name \_\_\_\_\_ Date (dd/mm/yyyy) \_\_\_\_\_  
(Only if two signatures are required)

**IMPORTANT: Attach a personal cheque marked "VOID", or debit slip, to avoid errors in transcription. If you change your account or financial institution, ensure you advise the payee organization.**

RE/MAX Platinum Realty  
5314 – 55 Street, Cold Lake, AB T9M 1R3  
T: (780) 661-7653 F: (780) 661-2098  
Email: finance@remaxplatinum.realestate