

MARGUERITA RESIDENCE CORPORATION

48 CHURCH STREET, BROCKVILLE, ONTARIO K6V 6L3

APPLICATION FOR SENIORS RENTAL ACCOMMODATION

Office email - margapt@cogeco.net Manager email - tblanchard@cogeco.net

Tel: (613)345-2734

The Marguerita Residence Corporation buildings are non-smoking. By signing this Application you are stating that you are a NON-SMOKER and agree to the terms of the said Policy.

1 BEDROOM _____ MARGUERITA _____ MARYANNA _____

****PLEASE NOTE**** Applicants wishing to apply for Wall Street Village that need financial assistance must apply at the United Counties of Leeds and Grenville Housing located at 25 Central Avenue Brockville ON.

DATE: _____ Mr: ___ Mrs: ___ Miss: ___ Ms. ___

1. Name: _____
Last Name (PRINT) Given Name

Address: _____ Tel:# _____

City _____ Province _____ Postal Code _____

2. Age _____ Date of Birth: Month _____ Day _____ year _____ SIN# _____
(For RGI subsidy only)

3. Alternate Contact Info: Name: _____

Relationship: (son/daughter etc.) _____ Tel. # _____

4. IF TWO PERSONS TO OCCUPY APARTMENT, PLEASE COMPLETE

Name: _____
Last Name (PRINT) Given Name

Age: _____ Date of Birth: Month: _____ Day _____ Year _____ Relationship to First Applicant: _____

5. Do you own a vehicle: No _____ Yes _____ If we have no parking will you still move? _____

6. Do you have a pet: No _____ Yes: _____ Type of Pet: _____

****PLEASE NOTE**** You must be 60 years of age to be waitlisted and 65 years of age for occupancy
Financial Information need NOT be completed if applying for a two-bedroom apartment.
Two-bedroom apartments are NOT subsidized; Singles are eligible for two-bedroom apartments.

We will also need a copy of your most recent " Notice of assessment" upon acceptance of an apartment

APPLICANT(S) STATEMENTS:

I declare the information on this application to be correct.

I understand that this application does not constitute an Agreement on the part of MARGUERITA RESIDENCE CORPORATION, or it's Agent, to provide me with a rental accommodation.

I acknowledge that this application becomes the property of Marguerita Residence Corporation upon delivery by myself to it, or it's Agent.

I further acknowledge the right of Marguerita Residence Corporation or it's Agent at any time prior to the execution and delivery to me of a lease hereby applied for, to withdraw, revoke or cancel without penalty or or liability for damages or otherwise, any acceptance or approval of this application previously made or given.

I HEREBY AUTHORIZE THE MARGUERITA RESIDENCE CORPORATION OR IT'S AGENT TO MAKE ANY ENQUIRIES IT DEEMS NECESSARY TO VERIFY ALL THE ABOVE INFORMATION.

First Applicant: _____ Second applicant: _____

