

**APPLICATION FOR RESERVATION OF A ROOM AT
CANDY RESIDENCE**
641 KING EDWARD AVE., OTTAWA, ONTARIO, K1N7N8
(Owned and Operated by Candy International Limited)
www.candyresidence.com

The following information is collected from you for the purpose of establishing and maintaining a relationship, offering and providing services, rendering credit decisions, marketing services, complying with the law, protecting your and our interests and any other compatible purposes. All information gathered in this application will be kept confidential and used only by Candy International Ltd. and its agents and or affiliates. In order to process the application a non refundable fee of \$15 is required. (Application is to be filled in by the applicant only).

I am enclosing this application for reservation of a room for the period of _____
starting _____ ending _____ (weeks/months)
(DD/MM/YY) (DD/MM/YY)

Upon approval of my application I agree to sign the residential agreement for the reservation period. I understand and confirm to comply with the terms and condition of occupancy of a room at Candy Residence. I confirm to pay an amount of \$_____ being the one month rent as a deposit to secure the reservation of the room along with a "key deposit" of \$200, and a non refundable amount of \$100 (common area cleaning charges) and post dated cheques required for the period of the reservation. I agree to pay \$60 as cleaning charges at the time of vacating the room. This amount can be deducted from the "key deposit" of \$200.

Personal Information		
_____	_____	_____
(Given Name)	(Family Name)	(Middle Name)
Having permanent address at:		
_____	_____	_____
(Name of Street)	(House/Apt)	(City)
_____	_____	_____
(Province)	(Postal Code)	(Country)
Please contact me at:		
_____	_____	_____
(Telephone)	(Fax)	(Email)

Other Optional Details:		
Date of Birth: _____	Place of Birth: _____	
(DD/MM/YY)	(City/Province/Country)	
Driver's License No.: _____	Issued in _____	Valid Until _____
	(Province)	(DD/MM/YY)
Nationality: _____	Permanent Canadian Resident:	YES / NO

If Student, _____
(Name of the Institution)

(Program)

(Year)

(Year of Graduation)

If Employed,

(Position/Title)

(Address)

(Telephone)

(Fax)

(Email)

Guarantor's Information: _____
(Name) (Relationship with Applicant)

(Name of Street)

(House/Apt)

(City)

(Province)

(Postal Code)

(Country)

(Telephone)

(Fax)

(Email)

Guarantor's Employer: _____ Telephone: _____

Previous Landlord: _____

(Name of Street)

(House/Apt)

(City)

(Province)

(Postal Code)

(Country)

(Telephone)

(Fax)

(Email)

The applicant and the guarantor have reviewed the terms and conditions and understand the rules and regulations for residency at Candy Residence and agree to abide by them.
By signing below, the applicant and the guarantor affirm that the information given in this application is true and complete and that they have not withheld any information. The applicant and the guarantor authorize Candy International Limited and its agents to give to, obtain, verify and exchange credit and other information about them including credit bureaus, mortgage insurers, and other persons with whom they have financial dealings as well as any other person as may be permitted or required by law.
The undersigned individually and jointly are responsible for payments, arrears of payments and damages arising from the residence breach of the subject residency should the applicant's application for residency be approved.

(Applicant Signature)

(Date)

(Guarantor Signature)

(Date)