

The Housing Desk

58 Queen St. S. Kitchener N2G 1V6
Phone: 743-1151 x117 Fax: 743-9452

HOUSING REGISTRY – Landlord Registration

Date _____

1. LANDLORD CONTACT INFORMATION:

Name: _____

Address: _____

Phone Number: _____

Fax Number: _____

E-mail Address: _____

How did you hear about the registry? _____

2. Property Information:

Inspected: Y N

Address of Unit: _____

Type of Unit: _____ (room, 1-bedroom etc.)

Do others live in the unit? Y N If yes, how many? _____

Are you a live-in landlord? Y N

How old is the rental unit? _____

Are there currently pets in the unit? _____

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3. RENTAL INFORMATION:

Rent Amount: \$ _____

First & Last required? **Y N** Installments acceptable? **Y N**

Lease? **Y N** Length? _____

Further information about the Unit?

Private Entrance	Yes	No	_____
Utilities incl.	Yes	No	If no, approx. cost: _____
Parking incl.	Yes	No	_____
Laundry avail.	Yes	No	Coin operated: _____
Furnished	Yes	No	_____
Kitchen avail.	Yes	No	_____
T.V./Cable incl.	Yes	No	_____
Phone Use incl.	Yes	No	_____
Phone Jack avail.	Yes	No	_____
Smoke Detectors	Yes	No	Where: _____
Smoking Allowed	Yes	No	_____
Fire Exit	Yes	No	_____
Pets Allowed	Yes	No	_____

NEIGHBORHOOD:

Bus Nearby: _____ Schools: _____

Shopping: _____ Laundromat: _____

4. TENANT INFORMATION:

Type of resident preferred (please circle): Male/Female/Either

Any other criteria for acceptable tenants:

5. COMMENTS/OTHER INFORMATION:

