

THIS IS SCHEDULE "E"

**(Housing Application with Point Rating System and Tenancy Agreement)
TO A SPONSOR MANAGEMENT AGREEMENT
MADE BETWEEN
THE MANITOBA HOUSING AND RENEWAL CORPORATION
AND**

EFFECTIVE ON THE

Housing Application attached hereto (seven pages)

Point Rating System Form for Applicants attached hereto (one page)

Standard Tenancy Agreement attached hereto (three pages)

Applying for Subsidized Housing

Fill out the attached application form in pen. Please print.

- If you need assistance, call the Property Manager to assist you.

Required documents

Attach a copy of photo identification with signature for all applicants 18 years and older. If you do not have photo ID include two of the following: birth certificate, social insurance card or Manitoba Health card.

- **Immigrants include proof of your status in Canada:** IMM1000, IMM5292, IMM5688, IMM1442 or permanent resident card.
- Applicants with children **include a copy of your Child Tax Benefit statement or Employment & Income Assistance budget letter.** *Children must live with you at least 50% of the time to be considered household members.*
- Applicants who need housing to keep or regain their children from Child & Family Services - **include a letter from your case worker** explaining your housing needs.

Assessing need and verifying income

We rent our housing based on need. We assess need based on income, condition of current housing and personal situation. To calculate household income, we use information from the Canada Revenue Agency.

- Please ensure all members of your household, 18 years or older, provide their **date of birth, social insurance number and sign the consent to share information on the application (page 6)**. This allows us to request your household income information directly from Canada Revenue Agency.
- If adults in your household did not file taxes last year, or their annual income has changed by more than \$1,200 since filing taxes, please provide proof for all income listed on page 3 of the application:
 - Two consecutive pay stubs for employment income
 - Budget letter for Employment & Income Assistance
 - Benefit statements for retirement income, employment insurance, workers' compensation and veterans' allowance
 - Financial statements for self employment
 - Payment agreements or orders to pay for alimony & child support
- Please include the net value of assets owned by all adults on the application form (page 4). Assets include real estate (property owned in or outside Canada) and investments (RRSPs, TFSAs, GICs, term deposits, mutual funds, shares, bonds and bank deposits).
 - If you own real estate, you will need to provide proof of its assessed value.
- If your current home is not suitable or you have special circumstances as listed on page 5, ask a doctor to complete the medical form for health issues or a support worker to complete the details form for housing issues. You are responsible for any fees charged for completing these forms.

Processing your application and offering homes

Mail or drop off your application and required documents to the responsible Property Management Agency or Property Manager at the housing complex. Once we process the application, we will send you a letter advising your status. If you are approved, we will contact you when a suitable home is available. Depending on your level of need and the demand of our location, the length of time you wait for an offer can vary greatly.

Updating your information

Please call us with any changes to your contact information, current housing or personal situation. We also will send you an update form on the anniversary of your application if you have not been housed.

Dropping off your application

If you are dropping off an application to the office, please allow at least 15 minutes for your visit so that an employee can review your application form and make sure you have included all the supporting documents. This will ensure your application is processed in a timely manner.



RENTAL APPLICATION FORM

HOUSEHOLD MEMBER INFORMATION

Please provide personal information below for all the people who will live in the household including you – the applicant.

Last Name	First Name	Relation to applicant	Date of birth dd/mm/yyyy	Gender M or F	Status in Canada Citizen, Permanent resident or Refugee
		Applicant			

Is any member of your household pregnant? ☐ Yes ☐ No If yes, attach a doctor's or midwife's note with the due date.

Will you share a bedroom with another household member? ☐ Yes ☐ No

APPLICANT CONTACT INFORMATION

Home address: _____ Phone: _____
Street Town Province Postal Code

Mailing address: _____ Alt. phone: _____
Street or post box Town Province Postal Code

If you want another person as the main contact for your application, please provide the following information:

Contact name: _____ Phone: _____ Organization: _____

What is your preferred language? ☐ English ☐ French

INCOME

	Applicant	Co-applicant	Other adults
Employment or employment insurance	\$ _____	\$ _____	\$ _____
Worker's compensation	\$ _____	\$ _____	\$ _____
Self employment income	\$ _____	\$ _____	\$ _____
Retirement income (CPP, OAS, pension, RRSP)	\$ _____	\$ _____	\$ _____
Alimony and child support	\$ _____	\$ _____	\$ _____
Veterans Affairs	\$ _____	\$ _____	\$ _____
Employment & Income Assistance	\$ _____	\$ _____	\$ _____
Other, please explain: _____	\$ _____	\$ _____	\$ _____
Total gross monthly income	\$ _____	\$ _____	

If you receive Employment & Income Assistance, please provide the following information:

Case #: _____ Worker: _____ Phone: _____

Do you have any assets? ☐ Yes ☐ No If so, please list total net value below:

Property (land, residential, commercial) \$ _____ Savings (GICs, deposits, etc.) \$ _____

AFFORDABILITY

What is your rent or mortgage payment: \$ _____ per month Electricity: \$ _____ per month

Natural Gas: \$ _____ per month Water: \$ _____ per quarter

RENTAL HISTORY

Please provide at least one year of rental history for each of the applicants.

Main applicant

Address	Contact person for landlord	Phone	Dates of tenancy

Co-applicant

Address	Contact person for landlord	Phone	Dates of tenancy

LOCATION

Please list the location that you are applying for.

SUITABILITY

How many bedrooms are in the home where you currently live? ☐ Studio ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

How many adults and children live in the home? Adults: _____ Children: _____

Do you currently have or plan on having a pet? ☐ Yes ☐ No

*One dog; **OR** one cat; **OR** two birds; **OR** one 15 gallon aquarium with fish per home is permitted. Any other type of pet needs special permission.*

Do you need parking? ☐ Yes ☐ No

Are you a smoker? ☐ Yes ☐ No

Would you be willing to live in a non-smoking building if available? ☐ Yes ☐ No

ADEQUACY

Is your current home in need of major repairs? ☐ Yes ☐ No

If yes, please include an Order to Repair from the Residential Tenancies Branch (RTB) or a completed Housing Details Form. Contact the RTB at 204.945.2476 (Winnipeg) or 1.800.782.8403 to get more information on Orders to Repair.

Is your current home condemned? ☐ Yes ☐ No

If yes, please include a copy of documents from Public Health or Fire Department that state the home is not habitable.

Are you or your co-applicant currently enrolled in a:

☐ Degree or diploma program

or

☐ Skills development course

College or University _____

Agency _____

Program _____

Course _____

Please provide proof of enrolment from the institution or agency.

SPECIAL CIRCUMSTANCES

Please answer the following questions. If you check “Yes”, you will need to provide the required documents listed beside the question when you submit your application.

The Medical Information and Housing Details form are located on page 7 & 8. You need to have these forms completed only if any of the situations below apply to you.

Are you:

Required document

Homeless? (living in a shelter, on the street or in the hospital)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Housing Details Form
Temporarily sheltered and at risk of homelessness? (staying at family or friends, hotel, hostel or transitional immigration centre)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Housing Details Form
A single parent or individual with a disability who is being forced to leave their current home within the next three months?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Housing Details Form <u>and</u> notice to vacate from current landlord
Needing to move due to family separation, loss of a caregiver or unsafe housing conditions for your children?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Housing Details Form
Needing to move to be closer to work, school, child care or support services?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Housing Details Form
Needing to move due to your medical conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Medical Information Form
Disabled and unable to work or take training for 12 months or longer?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Medical Information Form or a medical assessment
Requiring accessible housing to accommodate household members with physical disabilities?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Medical Information Form
Needing better housing in order to retain or regain custody of your children?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Letter from your Child & Family Services worker

PUBLIC TRUSTEE

If this application is being submitted on behalf of a person who is registered with the Public Trustee, the Trustee must complete the information below and stamp before submitting.

Name _____

Phone _____

Public Trustee Stamp

Your personal information is collected under the authority of Manitoba Housing programs and used to determine your eligibility for rental housing and any tenancy which may eventually result from this application. Your personal information is protected by the *The Freedom of Information and Protection of Privacy Act* and, if applicable, *The Personal Health Information Act* (PHIA).

In this form, words in the singular include the plural and words in the plural include the singular.

CONSENT TO DISCLOSE AND SHARE INFORMATION

I consent to Manitoba Housing sharing any personal information relating to me or my dependents with other government departments, external agencies or service providers to confirm eligibility for rental housing, determine my housing needs and rental charge. I understand that this information may be kept on file for the length of the tenancy. I understand that I may cancel or change this consent at any time in writing to Manitoba Housing.

I authorize any person, agency or organization to release or exchange information for that purpose. I understand this consent includes requests pertaining to my marital status, employment, income, assets and liabilities, medical condition, family status, benefits received under other programs or any other relevant personal information. I understand this includes Manitoba Housing conducting a personal investigation including past and present landlord reference checks, income verification and utility checks.

A copy or facsimile of this signed Consent to Disclose has the same effect as the original and is sufficient to authorize the disclosure or exchange of information.

DECLARATION

I understand that this application is not an agreement on the part of Manitoba Housing to provide me with housing. I acknowledge that, once submitted, this application becomes the property of Manitoba Housing.

I certify that the information given in this statement is true, correct, and complete in every respect. It fully discloses my income from all sources. If something is incorrect or not true, I understand that Manitoba Housing may cancel my application or take any other measures deemed appropriate.

CONSENT TO RELEASE INCOME INFORMATION

I consent to the release of income, expense and dependents’ information from my income tax records by the Canada Revenue Agency (CRA) to Manitoba Housing under the authority of the Housing and Renewal Corporation Act of Manitoba. The information will be relevant to, and used solely for, verifying eligibility, determining need and setting rental charges for government-subsidized rental housing.

This consent is valid for the previous two tax years, the current year and each year after if I am a tenant with Manitoba Housing. I understand that, if I wish to withdraw this consent, I may do so at any time in writing to Manitoba Housing.

Last Name	First name	Date of birth (dd/mm/yyyy)	Social Insurance Number	Signature	Date (dd/mm/yyyy)

Applicants signing with an “X” must have a witness:

Witness name (please print)

Witness signature

Date

Medical professionals must complete this form

Patient's name:

Please print

This patient has expressed a need for social housing or a transfer to a new rental suite due to a medical condition or a disability. In order to assist Manitoba Housing in determining eligibility and establishing appropriate housing, please answer the questions below, where applicable.

CERTIFIED MEDICAL PROFESSIONAL SECTION

The following professions are qualified to complete this form. Please check yours:

- ☐ **Medical doctor or nurse practitioner:** all conditions ☐ **Optometrist:** vision ☐ **Audiologist:** hearing
☐ **Psychologist:** cognition, memory ☐ **Occupational or physiotherapist:** mobility, agility, endurance

Does the patient have a disability that prevents them from working and taking part in training for 12 months or more?

☐ Yes ☐ No

Does the patient need to move out of their current home for medical reasons? ☐ Yes ☐ No

If yes, please explain (e.g. proximity to support services, mobility issues, mental health limitations).

Does the patient require any physical enhancements in their housing for medical reasons? ☐ Yes ☐ No

If yes, please describe the enhancements required (e.g. accessibility, elevator, extra space for medical equipment)

Does the patient require any support services to live independently? ☐ Yes ☐ No

If yes, please describe the services:

Medical Professional Information:

Name: _____
Please print

Address: _____ Phone: _____

Signature: _____ Date: _____

Support workers must complete this form

Client's name: _____
Please print

This form must be completed by a support worker who holds a position of responsibility in their profession or in their community and is not related to the applicant. Support workers include housing advocates, religious leaders, social workers and other professionals who can verify the housing needs of the applicants.

Adequacy

I have visited the applicant's home and can personally verify that the following issues must be addressed in their current home in order to make it healthy and safe:

I verify that the landlord has been contacted regarding these problems. ☐ Yes ☐ No

If yes, the issues have been unresolved for _____ months.

OR

I have knowledge of the landlord and expect retribution from said landlord if the applicant takes action through the Residential Tenancies Branch. ☐ Yes ☐ No

Homelessness

Based on my **direct observation** of the applicant's circumstances, I can confirm that the applicant is:

- a) Homeless (living in a shelter, on the street or in the hospital) ☐ Yes ☐ No
- b) Temporarily sheltered and at risk of homelessness ☐ Yes ☐ No
(living at friends or family, hotel, hostel or transitional immigration centre)
- c) A single parent or individual with a disability who is being forced to leave their current home within the next three months. Please explain: ☐ Yes ☐ No

Proximity

I confirm that the applicant is experiencing hardship due to the time they spend travelling daily to work, school, childcare or other needed services. ☐ Yes ☐ No If yes, please describe (e.g. time, distance, etc).

Declaration

I certify that the information provided here is true, correct and complete to the best of my knowledge.

Name: _____ Phone: _____
Please print

Job Title: _____ Organization: _____

Mailing Address: _____

Signature: _____ Date: _____

Priority Placement - Max 100 Points (Referral Documentation - MHRC Specific): for victims of domestic violence who may be temporarily situated in a crisis shelter, second stage housing or relative's/friend's home, refer to criteria contained in 2.2.4 of the MHRC Policy Manual.

AFFORDABILITY - Max 25 Total Points		
Level of Income - Max 15 Points		Ratio of Rent to Income - Max 10 Points
Ineligibility Limit - Income levels above the PIL (see PIL catchment areas)		
% Lower than PIL	Points	$\frac{\text{(Annual Rent+Utilities)}}{\text{Annual Income}} \times 100 = \text{---}\%$
71-100%	15	
66-70%	14	
61-65%	13	
56-60%	12	
51-55%	11	
46-50%	10	
41-45%	9	
36-40%	8	
31-35%	7	
26-30%	6	
21-25%	5	
16-20%	4	
11-15%	3	
6-10%	2	
5% or less	1	
HIL or above	0	
Assessed		

Asset Deductions	
- Disability exemption with appropriate documentation up to \$100,000	
	Points
\$15,000-\$20,000	-5
\$20,001-\$30,000	-7

(Annual Rent+Utilities) / Annual Income X 100 = ____%	
	Points
Over 50%	10
46-50%	8
41-45%	6
36-40%	4
30-35%	2
Below 30%	0
Assessed	

Asset Deductions	
- Disability exemption with appropriate documentation up to \$100,000	
	Points
\$15,000-\$20,000	-5
\$20,001-\$30,000	-7
\$30,001-\$40,000	-9
\$40,001-\$50,000	-11
\$50,001-\$60,000	-13
\$60,000 +	-15
Assessed	
Total Affordability Points	

Employment - Max 8 Points	
Employment Income / Total Income X 100 = ____%	
	Points
76-100%	8
51-75%	6
26-50%	4
11-25%	2
Below 10%	0
Total Employment Points	

Education - Max 8 Points	
Categories	Points
Career Development (enrolled in HRDC recognized institutes and taking progressional courses towards a degree/certificate of tangible skills after graduation - Appendix 1)	8
Pre-employment (general improvement or a stepping stone to career development, including ESL and skills training - Appendix 2)	4
Total Education Points	

ADEQUACY * - Max 15 Points	
Applicants get either 10 points for major repairs or 15 points for notice to vacate because of building being condemned. For major repairs, Residential Tenancies Branch (RTB) - Order to Repair or completed Housing Details Form required to verify that problems have not been resolved in a reasonable time frame.	Points
Physical Condition - broken windows, doors, fixtures or any other problems which are health and safety risks	10
Kitchen Facilities Inadequate - cannot store or prepare food; plumbing does not work	
Bathroom Facilities Inadequate - plumbing does not work	
Windows - lack of emergency exit from bedrooms	
Unsanitary Condition - mice, cockroaches, mold or any other obvious unsanitary condition	15
Building Condemned - require written verification from public health, fire department or municipality	
Total Adequacy Points	

Permanent Disability - 16 Points	
Does not apply to Seniors (aged 65 and older). Refer to the definition in the footnote ¹ . Points of Permanent Disability cannot be combined with Employment and/or Education points ² . Medical verification of applicant's inability to work or receive education is required ³ .	16
Permanent Disability Points	

Special Circumstances - Max 15 Points	
Points of each category cannot be combined.	Points

Suitability (Overcrowding) - Max 9 Points

- If overcrowding results from someone renting a room in the home - no points assessed.	
- Based on National Occupancy Standard	Points
In need of three or more bedrooms	9
In need of two more bedrooms (no points given if already receiving points for the need of 3 more bedrooms), or	6
In need of one more bedroom (no points given if already receiving points for the need of 2 or 3 more bedrooms)	3
Total Suitability Points	

1) Homeless or at risk of homelessness	
Currently homeless: applicants need support services and cannot find anywhere else to live temporarily (e.g. living in shelter, discharge from institutes, living on the street, current home destroyed by fire or flood). Requires completed Details Form.	15
Temporarily sheltered and at risk of homelessness: living in temporary housing situations such as couch surfing ⁴ , hotel, hostel, or transitional immigration centre ⁵ . Requires completed Details Form.	10
Vulnerable Person forced to leave current housing: people in family separation ⁶ ; single parents ⁷ ; single person with disabilities ⁸ . Requires completed Details Form.	10
2) Housing as a barrier to family reunification⁹. Housing required to regain custody of children. Requires CFS letter.	10
3) Minor or temporary disabilities: Unable to maintain current home or remain independent due to physical limitations or mental health problems. Applicants with disability require accessible housing or support services within a building. Requires a completed Medical Information Form.	2
4) Proximity - applicants required to move to be nearer to necessary work, school, child care, community support services in a reasonable time frame ¹⁰ .	2
Total Other Points	

TOTAL POINTS	
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Standard Residential Tenancy Agreement
(For tenancies that include tenant services)

This form of Tenancy Agreement is prescribed under *The Residential Tenancies Act* (the Act) and applies to all residential tenancies in Manitoba where the landlord provides tenant services as defined in the Act. All information in this form must be shown in not less than 12-point type. Two copies must be signed by both landlord and tenant. One copy must be given to the tenant within 21 days after it is signed.

This Tenancy Agreement is made in duplicate between:

_____, the Landlord
Legal name, address, telephone and fax number of landlord(s)
and
_____, the Tenant
Name of tenant(s)

1. Rental Unit

The landlord agrees to rent to the tenant the rental unit at the following location:

Address

2. Term of Tenancy

Complete either (a) or (b), but not both:

(a) Fixed Term Tenancy

The tenancy is for a fixed term beginning on _____, 20____ and ending
(date)
on _____, 20____.
(date)

Unless the tenancy has been terminated in accordance with the Act, the landlord shall offer the tenant a renewal of this agreement at least three months before the date the agreement ends. If the tenant does not sign and return the renewal at least two months before the date the agreement ends, this agreement will expire on that date.

(b) Periodic Tenancy

The tenancy is periodic, beginning _____, 20____ and continuing
on _____ (date) _____

from _____ .
(week to week, month to month, or other period)

3. Deposit (if required)

The landlord acknowledges receipt from the tenant of:

☐ a security deposit of \$ _____ on _____, 20____ .
(maximum amount = ½ of Rent Payable)

☐ a pet damage deposit of \$ _____ on _____, 20____ .
(maximum amount = 1 month of Rent Payable)

☐ a tenant services security deposit of _____ on _____, 20____ .
\$ _____
(maximum amount = ½ of Tenant Services Charge)

4. Rent and Tenant Services Charge

Unless otherwise agreed upon, the tenant shall ensure that the payment for rent and tenant services charge is delivered to the address provided by the landlord.

Payment is due on the _____ day of each month. The tenant must pay on time. The
_____ landlord
may also give the tenant a Notice of Termination for Non-Payment of Rent and Tenant Services Charge.

Unless otherwise agreed upon by the landlord and tenant, the tenant may not opt out of paying for tenant services. The tenant is responsible to pay for the services even though the tenant may not use the services.

The tenant agrees to pay to the landlord the following amount:

Basic Rent:	\$ _____
For _____ parking spaces:	\$ _____
Other (specify): _____	\$ _____
Rent Payable	\$ _____
Less Rent Discount*	\$ _____
Actual Amount Tenant Must Pay For Rent	\$ _____
Tenant Services Charge Payable (from the Schedule)	\$ _____
Total Amount Tenant Must Pay	\$ _____

(Complete this section if a rent increase on the rental unit is due before the date this agreement ends.)

☐ The landlord plans to increase the rent by the annual rent increase guideline on (date) _____ . The landlord must provide the tenant with a Notice of Rent Increase at least 3 months before the rent is increased.

- ☐ The landlord plans to apply for a rent increase above the guideline to increase the rent on (date) _____. The proposed Rent Payable will be \$ _____.
The landlord must provide the tenant with a Notice of Rent Increase at least 3 months before the rent is increased.

(For information about tenant services charge increase, see the Schedule.)

***Rent Discount**

A landlord is not required to offer a rent discount, but if a discount is given, it must be provided for in a written agreement. Reducing or removing a rent discount is not considered a rent increase under *The Residential Tenancies Act*. However, a discount cannot be reduced or removed unless the tenant fails to meet a condition of a conditional discount or the landlord gives the tenant at least 3 months' written notice of the reduction or removal. If a tenancy agreement or discount agreement is for a fixed term, a landlord cannot reduce or remove an unconditional discount during the term of the agreement.

(Complete this section if there is a rent discount.)

The landlord is offering a rent _____ subject to the following discount of \$ _____ conditions, if any:

(Provide details of any conditions)

(Complete this section, if this form is being used to renew an existing tenancy agreement or there is a change to the discount during the term of this agreement.)

- ☐ Discount is the same as last year's or _____ increased by \$ _____.
- ☐ Discount is reduced by \$ _____.
- ☐ Discount is removed.
- ☐ The proposed Rent Payable is subject to an application to the Residential Tenancies Branch
for an above-guideline rent increase. The discount may be reduced or removed depending
on the final decision on the landlord's application. In any event, the Actual Amount Tenant
Must Pay for Rent will not _____ exceed \$ _____.

5. Tenant Services

The landlord agrees to provide the tenant services shown on the attached Schedule. The landlord may only reduce or withdraw a tenant service after giving the tenant three months' written notice of the

reduction or withdrawal.

6. Services and Facilities (Other than Tenant Services as referred to in the Schedule)

(a) The tenant agrees to pay for the following services and facilities:

(b) The landlord agrees to provide, or pay the supplier of, all other services and facilities, including the following utilities:

The landlord must not reduce or withdraw a service that is included in the rent, unless the landlord applies to the Residential Tenancies Branch for approval.

7. Occupants of Rental Unit

In addition to the tenant, only the following people may occupy the rental unit:

If the tenant wants an additional person to occupy the unit, the tenant must get the landlord's consent. In these circumstances, the landlord will be entitled to increase the tenant services charge payable. If the tenant has guests who use the tenant services (e.g. meals), the landlord may charge an additional fee.

8. Use of Rental Unit for Residential Purposes only

The tenant agrees to use the rental unit and residential complex for residential purposes only and shall not carry on, or permit to be carried on, any trade or business in the rental unit without the written consent of the landlord.

9. Furniture

Check either (a) or (b):

- (a) _____ No furniture is provided.
(b) _____ Furniture is provided and an itemized list of the furniture is attached.

10. Entry to Provide Tenant Services

The landlord has the right to enter the rental unit to provide tenant services to the tenant as shown on the Schedule without giving the tenant advance notice.

11. Obligations under Act

The landlord and tenant shall comply with all obligations imposed on them by the Act.

12. Assignment or Subletting (check one)

- ☐ The tenant may assign or sublet this agreement with the written consent of the landlord. See Form 3 of the Residential Tenancies Regulation for more information.
- ☐ The tenant may not assign this agreement. The tenant may terminate this agreement by giving the landlord a notice of termination on the last day of a rental payment period to be effective not earlier than the last day of the following rental payment period.

13. Ending the Tenancy

The landlord or the tenant may terminate this agreement in the manner and under the circumstances described in the Act.

14. Additional Rules and Conditions

The landlord and tenant agree to comply with any additional rules and conditions that are attached to this tenancy agreement. To be enforceable, rules and any amendments must be given to the tenant in writing and be reasonable in all circumstances. Any additional rule or condition that is inconsistent with the Act cannot be enforced.

15. Signatures

Do not sign this agreement unless you understand and agree with everything in it.

_____ Date	_____ Print name of landlord	_____ Signature of landlord
_____ Date	_____ Print name of tenant	_____ Signature of tenant
_____ Date	_____ Print name of tenant or personal representative	_____ Signature of tenant or personal representative

