



APPLICATION FOR RENTAL ACCOMODATION

THE LANDLORD ACKNOWLEDGES THE CONFIDENTIALITY OF THIS DOCUMENT

ALL PROPERTIES ARE NO SMOKING, NO PET PROPERTIES

NAME OF APPLICANTS	PRESENT ADDRESS	FOR HOW LONG?

Address of Rental Property: _____

Rent: _____ S.D. _____ *Rent is collected by pre-authorized debit, and security deposits need to be paid by E-transfer, Cash, Cheque.

Tenancy: ☐ Annual Starting date: from _____ to _____

Type of Accommodation: ☐ Basement Suite ☐ Complete Unit ☐ Main & Upper Only

Number of People (please indicate ages for children): Adults:____ Children:____

Contact Information	APPLICANT 1	APPLICANT 2	APPLICANT 3
Personal/Residential:			
Business/Work:			
Applicants	APPLICANT 1	APPLICANT 2	APPLICANT 3
Employer:			
Address:			
Phone number:			
Age:			
Occupation & Years at work:			
Monthly Income:			
Bank/Letter of Good Standing:			
(2) Credit References:			
Vehicle Information	Make & Model:	Color:	License Number:

I/We hereby certify that all statements made in this application are true and I/we hereby authorize the Landlord to conduct a credit check.

Applicant Signature: _____

Date: _____

Co - Applicant Signature: _____

Date: _____

Co - Applicant Signature: _____

Date: _____

FOR OFFICE USE Approval Date: _____ Signature: _____