

INCOME

RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated. All data herein is deemed confidential.

PERSONAL IN	FORMA'	ΓΙΟΝ									
FIRST NAME		MIDDLE		LAST			S.I.N.				
DATE OF BIRTH		MARITAL STATUS						DRIVERS LICENSE # PROVINCE			
PHONE	HONE		PHONE EXT			E		EMAIL	EMAIL		
PRESENT HOME ADDRESS					CITY/PROV/PO	STAL					
LENGTH OF TIME		PRESENT LANDLORD			LANI			ANDLORD PHONE			
REASON FOR LEAVING		AMOUNT			ENT	Is your present rent up to date?					
PREVIOUS HOME ADDRESS	CITY/PROV/PC			STAL							
LENGTH OF TIME		PREVIOUS LANDLORD				LANDLORD PHONE					
REASON FOR LEAVING		AMOUNT OF			RENT			as your rent up to date?			
NEXT PREVIOUS HOME ADDRESS				CITY/PROV/POSTAL				•			
LENGTH OF TIME			NEXT PREVI	OUS LANDLORD				LANDLORD PHONE			
REASON FOR LEAVING			AMOUNT OF			RENT Was			s your rent up to date?		
PROPOSED O	CLIDAN	IT(S)									
PROPOSED OCCUPANT(S) NAME RELATIO) Onship			OCCUPATION		AGE			
NAME F			RELATIONSHIP			OCCUPATION				AGE	
NAME			RELATIONSHIP			OCCUPATION				AGE	
NAME I			RELATIONSHIP			OCCUPATION				AGE	
NAME RELA			IONSHIP			OCCUPATION AGE					
DDADASED DE	T(C)										
PROPOSED PET(S) NAME TY			YPE/BREED							AGE	
NAME		TYPE/B	TYPE/BREED							AGE	
NAME		TYPE/B	TYPE/BREED						AGE		
						_					
VEHICLE(S) IN		TION	MODEL		COLOR		PLATE #			DOVINCE	
			MODEL				PLATE #			PROVINCE PROVINCE	
YEAR	MAKE	MC		MODEL COLOR		PLAIL #			FROVINCE		
EMPLOYMENT											
CURRENT EMPLOYER			OCCUPATION						HOURS/WEEK		
SUPERVISOR	PHONE			EXT:			YEARS EMPLOYED				
ADDRESS				CITY/PROV/POSTAL				•			
CURRENT EMPLOYER				OCCUPATION				HOURS/WEEK			
SUPERVISOR				PHONE EXT:			YEARS EMPLOYED				
ADDRESS				CITY/PROV/POSTAL				•			
INCOME											
CURRENT				SOURCE				PROOF OF INCOME			
CURRENT INCOME	SOURCE						PROOF OF INCOME				
CURRENT	SOURCE					PROOF OF INCOME					

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	Please	fill ou	t this form COMPLETELY and	l sign where indic	ated.			
CREDIT CARD / FINA	NCIA	L IN	FORMATION					
CAR LOAN LIEN HOLDER			BALANCE MONTHLY OWED PAYMENT			CREDITOR'S PHONE #		
CREDIT CARD COMPANY			BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #		
CREDIT CARD COMPANY			BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #		
CREDIT CARD COMPANY			BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #		
CHILD SUPPORT/ OTHER CREDIT OWED			BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #		
BANK ACCOUNT NAME OF BANK			BALANCE	MONTHLY PAYMENT		ACCOUNT NUMBER		
EMERGENCY / PERSO	NAL I	REF	ERENCE INFORMA	ΓΙΟΝ				
EMERGENCY CONTACT			PHONE		PHONE			
RELATION			ADDRESS	CITY/PROV/POSTAL				
EMERGENCY CONTACT			PHONE	PHONE				
RELATION			ADDRESS	CITY/PROV/POSTAL				
PERSONAL REFERENCE			PHONE	PHONE				
RELATION			ADDRESS	CITY/PROV/POSTAL				
PERSONAL REFERENCE			PHONE	PHONE				
RELATION			ADDRESS	CITY/PROV/POSTAL				
APPLICANT QUESTIO	NNA	IRE	/ AUTHORIZATION					
Has applicant ever been sued for bills?	YES	NO						
Has applicant ever been bankrupt?	YES	NO	Has applicant ever been brought to c	ourt by another landlo	ord?	YES	NO	
Has applicant ever been guilty of a felony?	YES	NO	Has applicant ever moved owing rent	YES	NO			
Has applicant ever broken a Lease? YES NO			Is the total move-in amount available now (rent and deposit)?				NO	
Applicant authorizes the landlord to contact p All information is true, accurate and complete ANY PERSON OR FIRM IS AUTHORIZED TO RI X APPLICANT SIGNATURE	e to the be	st of app	olicant's knowledge. Landlord reserves t	the right to disqualify	enant if inform	nation is not	as represented.	
If you have any q	uestions al	bout the	e interpretation or legality of this form, p	olease consult an atto	rney or other q	ualified pers	son.	
NOTES:								

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