



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 INFORMATION

FIRST NAME	MIDDLE	LAST	S.I.N.
DATE OF BIRTH	MARITAL STATUS	DRIVERS LICENSE #	PROVINCE
PHONE	PHONE	EXT.	EMAIL
PRESENT HOME ADDRESS		CITY/PROV/POSTAL	
LENGTH OF TIME	PRESENT LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING		AMOUNT OF RENT	Is your present rent up to date?
PREVIOUS HOME ADDRESS		CITY/PROV/POSTAL	
LENGTH OF TIME	PREVIOUS LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING		AMOUNT OF RENT	Was your rent up to date?
NEXT PREVIOUS HOME ADDRESS		CITY/PROV/POSTAL	
LENGTH OF TIME	NEXT PREVIOUS LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING		AMOUNT OF RENT	Was your rent up to date?

PROPOSED OCCUPANT(S)

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S)

NAME	TYPE/BREED		AGE
NAME	TYPE/BREED		AGE
NAME	TYPE/BREED		AGE

VEHICLE(S) INFORMATION

YEAR	MAKE	MODEL	COLOR	PLATE #	PROVINCE
YEAR	MAKE	MODEL	COLOR	PLATE #	PROVINCE

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 INCOME	SOURCE	PROOF OF INCOME
CURRENT INCOME	SOURCE	PROOF OF INCOME
CURRENT INCOME	SOURCE	PROOF OF INCOME



CREDIT CARD / FINANCIAL INFORMATION

EMERGENCY / PERSONAL REFERENCE INFORMATION

APPLICANT QUESTIONNAIRE / AUTHORIZATION

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant. All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

DATE _____

NOTES:

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