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| Rental Application |
| Applicant Information |
| First Name: LastName: |
| Date of birth: | SSN: | Phone: |
| Current address: |
| City: | State: | Postal Code: |
| Landlord Name & Phone No.

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 Rent (Please circle) |  | How long? |
| Previous address: |
| City: | State: | Postal Code: |
| Owned Rented (Please circle) | Monthly payment or rent: | How long? |
| Business Information |
| Current Business Title:  |
| address: | How long? |
| Phone: | E-mail: | Fax: |
| City: | State: | Postal Code: |
| Applicant’s Position: | GST No. | Annual income:  |
| Emergency Contact |
| Name of a person not residing with you: |
| Address: |
| City: | State: | Postal Code: | Phone: |
| Relationship: |
| Co-applicant Information, if partnered business |
| Name: |
| Date of birth:  | SSN: | Phone: |
| Current address: |
| City: | State: | Postal Code: |
| Own Rent (Please circle) | Monthly payment or rent:  | How long? |
| Previous address: |
| City: | State: | Postal Code: |
| Owned Rented (Please circle) | Monthly payment or rent: | How long? |
| Co-applicant Business or Employment Information |
| Current Business or Employer: |
| Business or Employer address: | How long? |
| Phone: | E-mail: | Fax: |
| City: | State: | Postal Code: |
| Position: | Salary $ | Annual Personal income: |
| References |
| Name:  | Address: | Phone: |
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| I authorize the verification of the information provided on this form about my credit and employment. I declare that all the information which was provided in this application to be true and accurate, also it can be used for the completions of lease agreement process; I have received a copy of this application. |
| Signature of applicant: | Date: |
| Signature of co-applicant: | Date: |