APPLICATION TO RENT FORM

**(PRINT CLEARLY)**

Please complete one application for each person not related by blood or marriage. Application may be rejected if a line is not filled in. You will also be required to present 2 pieces of identification for verification purposes.

Date premises required: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Smoking Allowed – No

Rental Rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Security Deposit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth (yr/m/d):\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_ Social Insurance Number:\_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_

Driver’s License #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province: \_\_\_\_\_\_\_\_\_\_\_ Valid – Yes: \_\_\_\_\_\_ No: \_\_\_\_\_\_\_\_

Driver’s License Issued on (yr/m/d): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Expires (yr/m/d): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Current Address: (number/street) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Province: \_\_\_\_ Postal Code: \_\_\_\_\_\_\_ Phone: (\_\_\_\_\_)-\_\_\_\_\_-\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How long residing at this address: \_\_\_\_\_\_\_\_\_Rent Amount: \_\_\_\_\_\_\_Reason for Leaving: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Landlord: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Landlord’s Phone: (\_\_\_\_\_\_\_\_)-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

Previous Landlord: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Landlord’s Phone: (\_\_\_\_\_\_\_\_)-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

Current Employer (name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_\_\_)-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_How Long: \_\_\_\_\_\_\_\_Salary or Annual Income: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Employer (name): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_\_\_)-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_

Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long: \_\_\_\_\_\_\_\_

Spouse’s Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth (yr/m/d):\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_ Social Insurance Number:\_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_

Spouse’s Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ How Long: \_\_\_\_\_\_\_\_Salary or Annual Income\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vehicle 1 Information (yr/make/model/color/plate# ): \_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_

Vehicle 2 Information (yr/make/model/color/plate# ): \_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_\_ / \_\_\_\_\_\_\_\_

Smokers: Yes No

Pets: Yes No If Yes give details:

Type Breed Size Temperament

Type Breed Size Temperament

Credit References (list bank, credit union, charge accounts, or other credit references.)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been evicted as a tenant? Yes\_\_\_ No \_\_\_ If Yes Give Reason \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of adults to occupy rental unit: \_\_\_\_\_\_\_ Number of children under 18 to occupy rental unit: \_\_\_\_\_\_\_\_

Please list all occupants: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(List any additional occupants on the back of this form)

In case of an emergency please notify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: (\_\_\_\_\_\_)-\_\_\_\_\_\_\_\_-\_\_\_\_\_\_\_\_

Address: Street\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Prov.\_\_\_\_\_\_\_Postal Code\_\_\_\_\_\_\_\_\_\_\_

TENANCY WILL BE DENIED IF you misrepresent any information on the application. If misrepresentations are found after the rental agreement is signed, your rental agreement will be terminated.

This is to advise that I the undersigned hereby authorize \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the person to whom my application has been submitted, to obtain a consumer credit report, an eviction search and to make any other inquiries as deemed necessary in determining eligibility for tenancy and assessing credit worthiness. I understand that the information set out in the rental application form may be used for purposes of responding to emergencies, ensuring the orderly management of the tenancy, complying with legal requirements and for collection purposes should rent be left owing or rental property damaged at termination of lease or end of tenancy.

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# ALL INFORMATION HEREIN IS DEEMED CONFIDENTIAL

Return completed application to: Sharie and Shawn Rideout

Phone: 403-837-7353

Email: ssride@me.com