**RENTAL APPLICATION**

**(Highlighted MUST be filled out)**

**Tenant Insurance will also be MANDATORY BEFORE Keys will be given to unit.**

**Initial: \_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| Monthly Rent Payment: | |  |
| Bedrooms: |  | |

**APPLICANT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | | | Day Time Phone: | |  |
| Date of Birth: | |  | | Alternative #: |  | |
| Email Address: | | |  | Cell Phone# |  | |
| Proof of ID: |  | | | | | |

**CO-APPLICANT**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Full Name: |  | | | Day Time Phone: | |  |
| Date of Birth: | | |  | Alternative #: |  | |
| Email Address: | | |  | Cell Phone#: |  | |
| Proof of ID: | |  | | | | |

|  |  |  |
| --- | --- | --- |
| Age of Dependants: | |  |
| List all Pets: |  | |

**RESIDENTIAL HISTORY FOR LAST TWO YEARS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Current Address: | | | |  | | | | | APT#: | |  | | | | City: |  | | |
| Province: | |  | | | | | | | | | | | Postal Code: | | |  | | |
| Move in Date: | | |  | | | | Reason for Leaving: | | | | |  | | | | | | |
| Rent$: |  | | | | Owner/Manager: | | |  | | | | | | | | | Phone: |  |
| Can we contact owner/manager: | | | | | |  | | | | If no, why?: | | | |  | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Previous Address: | | | |  | | | | | APT#: | |  | | | | City: |  | | |
| Province: | |  | | | | | | | | | | | Postal Code: | | |  | | |
| Move in Date: | | |  | | | | Reason for Leaving: | | | | |  | | | | | | |
| Rent$: |  | | | | Owner/Manager: | | |  | | | | | | | | | Phone: |  |
| Can we contact owner/manager: | | | | | |  | | | | If no, why?: | | | |  | | | | |

**EMPLOYMENT INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Your Status: Full time: | | | |  | Part Time: |  | | Student: | |  | Unemployed: |  |
| Employer: | |  | | | | | | | | | | |
| Date Employed: | | |  | | | | Position: | |  | | | |
| Salary: |  | | | | | | | | | | | |
| If employed by above for less than 12 months, please give name & phone of previous employer or school. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

**CO-APPLICANT EMPLOYMENT INFORMATION**

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Your Status: Full time: | | | |  | Part Time: |  | | Student: | |  | Unemployed: |  |
| Employer: | |  | | | | | | | | | | |
| Date Employed: | | |  | | | | Position: | |  | | | |
| Salary: |  | | | | | | | | | | | |
| If employed by above for less than 12 months, please give name & phone of previous employer or school. | | | | | | | | | | | | |
|  | | | | | | | | | | | | |
|  | | | | | | | | | | | | |

**EMERGENCY CONTACT:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name: |  | | | | Address: |  | | |
| Phone#: | |  | Cell Number: |  | | | Relationship: |  |

ADDITIONAL INFORMATION

|  |
| --- |
| Please give any additional information that might help management evaluate this application: |
|  |
|  |
|  |
|  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| Please Sign: |  | Date: |  |
|  | Applicant |  |  |
| Please Sign: |  | Date: |  |
|  | Co-Applicant |  |  |