

**Tenant Rental Application Form**

Property Address: \_\_\_\_\_ Intended Rent: \_\_\_\_\_

Intended Possession Date: \_\_\_\_\_ Today's Date: \_\_\_\_\_

First Name: _____	Last Name: _____
Date of Birth: _____	SIN Number: _____
Driver's Licence: _____	Primary Phone Number: _____
Alternate Phone Number: _____	Email: _____

Current Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Years At Address: \_\_\_\_\_

Landlord's Phone Number: \_\_\_\_\_ Current Rent: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Employer's Phone Number: \_\_\_\_\_

Monthly Income: \_\_\_\_\_ Years at Employer: \_\_\_\_\_

*\*If less than 1 year at current address, please fill out the following fields:*

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Years At Address: \_\_\_\_\_

Landlord's Phone Number: \_\_\_\_\_ Previous Rent: \_\_\_\_\_

*\*The following fields are to be filled if the residence will be shared with a single roommate and/or spouse/partner that will not be listed on the lease agreement :\**

Roommate/Spouse First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SIN Number: \_\_\_\_\_

Driver's Licence: \_\_\_\_\_ Primary Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Current Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Years At Address: \_\_\_\_\_

Landlord's Phone Number: \_\_\_\_\_ Current Rent: \_\_\_\_\_

Current Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ Employer's Phone Number: \_\_\_\_\_

Monthly Income: \_\_\_\_\_ Years at Employer: \_\_\_\_\_

*\*Please list names, ages, and relationship of all intended occupants:*

Name	Age	Relation

**\*ALL INTENDED RENT-PAYERS (ROOMMATES) MUST FILL OUT A SEPARATE APPLICATION**

*\*Do you have any pets?* **YES** **NO**

*Please describe:* \_\_\_\_\_

*\*Do you smoke?* **YES** **NO**



***\*Character Reference (No relatives or employers/employees):***

1)Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

2)Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

3)Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

***AUTHORIZATION FOR CREDIT AND REFERNCE CHECK:***

<p>Applicant: _____ Date: _____</p>	<p>Signature: _____</p>
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