

APPLICATION FORM

Tenant
Cosignor

Building number _____ Unit _____ 3 ½ 4 ½ Date desired _____

PERSONNAL INFORMATION OF THE CANDIDATE

Last name	
First name	
Date of birth (YYYY\MM\DD)	
Phone number (cell)	
Phone number (residence)	
Email address	

To confirm his identity, the candidate agrees to present to the landlord or his representative, a valid photo ID issued by the government.

Current employer

Company name			
Address		City	
Position title			
Start date			
Gross annual wage			
Person of contact (HR)			
Phone number		Email	

In order to confirm his income, the candidate agrees to provide the lessor or his representative with a copy of his pay stub or his bank statement or government allowance, for the last three (3) months.

Current address

Civic number	street	unit	city	province	postal code
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Current landlord

Lease term	from: _____	to: _____
Rent \$/month	_____	Person of contact _____
Phone number	_____	Email address _____

Previous address (if less than 3 years)

Civic number	street	unit	city	province	postal code
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Previous landlord

Lease term	from: _____	to: _____
Rent \$/month	_____	Person of contact _____
Phone number	_____	Email address _____

Do you have a vehicle, and will you need a parking space?				Yes	No
Brand	Model	Color	License		

Do you need support during an emergency evacuation due to reduced mobility (e.g. fire) ?	Yes	No
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Minor children	Yes	No	How many	Age
Pet	Yes	No	How many	Details

Emergency contact

You authorize the landlord to contact this person in the event of absence or emergency.	
Name	
Relation type	
Phone number	
Email address	
Civic address	

Date _____ Signature _____

By signing this form, you declare that the information provided is true. You authorize the landlord or their representative to communicate with third parties (investigator, employer, owner) in order to obtain and / or validate personal information about you and to perform a credit check to establish your financial capacity and your respect for a lease. The information obtained on this form is confidential.