



319 COLLEGE AVENUE  
 P. O. BOX 11  
 OSHAWA, ONTARIO  
 L1H 7K8  
 PHONE (905) 723-1191 FAX (905) 571-5437

**APPLICATION FOR RENTAL**

**Applicant**

Unit \_\_\_\_\_ Occupancy Date \_\_\_\_\_

NAME \_\_\_\_\_

(Please Print) First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
 Home Number ( ) \_\_\_\_\_ Work Number ( ) \_\_\_\_\_

Email address \_\_\_\_\_ @ \_\_\_\_\_

Date of Birth 19 \_\_\_\_ / \_\_\_\_ / \_\_\_\_ SIN \_\_\_\_ - \_\_\_\_ - \_\_\_\_  
 Year Month Day

**Current Information**

Current Address: \_\_\_\_\_  
 Street City Province Postal Code

How long have you lived at this address \_\_\_\_\_ Years \_\_\_\_\_ Months  
 Do you Own  Rent  Live with parents  Other

Reason for moving: \_\_\_\_\_

**Financial Information**

Current Employment Full Time  Part Time  Retired  Student  Unemployed

Present Employer: \_\_\_\_\_ Years of Service \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Income \$ \_\_\_\_\_ (Annually)

Type of Business: \_\_\_\_\_ Occupation \_\_\_\_\_

Previous Employment Full Time  Part Time  Retired  Student  Unemployed

Previous Employer: \_\_\_\_\_ Years of Service \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Address: \_\_\_\_\_ Income \$ \_\_\_\_\_ (Annually)

Type of Business: \_\_\_\_\_ Occupation \_\_\_\_\_

Name and address of present landlord: \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Present Rent \$ \_\_\_\_\_ (Month)

Are you Single \_\_\_\_\_ Married \_\_\_\_\_ Children  Yes  No Ages \_\_\_\_\_

Bank Reference \_\_\_\_\_ Acct. No. \_\_\_\_\_

**References**

Name	Address	Telephone No.
_____	_____	( ) _____
_____	_____	( ) _____
_____	_____	( ) _____

I certify that all information in this application is true and complete and acknowledge that the landlord will be relying on this information to determine my creditworthiness. I authorize the Landlord to give and receiver credit information about me.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

I \_\_\_\_\_ do hereby apply to rent unit # \_\_\_\_\_ the rent begin \$ \_\_\_\_\_  
 monthly, I also understand that if I cause any damage to the unit or any of the Landlord's or other tenant's  
 property I agree to pay to repair the damage to the unit and replacement or repairs to the Landlord's and the other  
 tenant's property. I also agree to abide by all rules and regulations of the site.

Applicant's Signature \_\_\_\_\_  
 Date \_\_\_\_\_

Approved by \_\_\_\_\_  
 Approved  Not Approved