APPLICATION TO RENT
LANDLORD'S REFERENCE AND INFORMATION SHEET

PLEASE PRINT

Date_____
Date premises required_____

Address of premises to be rented:_____710 Humberwood Blvd., Etobicoke_____ Apt. no._____

Property Type: [ ] Condo Apt [**X**] Townhouse [ ] Detached [ ] Semi-detached [ ] Bungalow

Applicant's legal name _____

Applicant's preferred name_____Date of Birth_____

Social Insurance Number_____ [ ] Driver's License or [ ] Provincial ID Number_____

Applicant's present residence_____

Language Spoken:_____ Phone_____ Cell Phone_____ E-mail_____

How long?_____ Present monthly rent_____ Reason for leaving_____

Present landlord_____ Phone Number_____

Applicant is employed by_____Occupation_____

Phone_____Average salary or annual income $_____

Former employer_____

From_____ to_____ Phone_____

Co-Applicant's legal name _____

Co-Applicant's preferred name_____Date of Birth_____

Social Insurance Number_____ [ ] Driver's License or [ ] Provincial ID Number_____

Applicant is employed by_____Occupation_____

Phone_____Average salary or annual income $_____

Former employer_____

From_____ to_____ Phone_____

Number of adults to occupy apartment_____ Number of children under 18_____

Ages of children _____ _____ _____ _____ _____ Total number of occupants_____

Pets to occupy apartment_____

A no-smoking policy is in effect.

Have you ever paid rent late?_____ Why? _____

_____

Credit references: (List bank, credit union, type of accounts, or other credit references.)

1._____

2._____

3._____

Personal references:

1._____ Phone_____

Relationship_____ Cell Phone_____

2._____ Phone_____

Relationship_____ Cell Phone_____

Referred to landlord by_____

I hereby authorize the person or firm to whom this application is submitted to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement.

Signature_____ Date_____

Signature_____ Date_____

Witness_____ Date_____

The applicant declares all above statements to be true and authorizes the landlord to contact available references. This information is confidential and will not be released to anyone without the consent of the applicant.

**Smoking shall be prohibited in all enclosed areas of this unit. This includes, but is not limited to, the residential unit, all common areas, hallways, stairs, elevators, restrooms, and any other enclosed areas.*

Return this form by submitting it on our online portal: https://live.vcita.com/site/xv6jgkr1efdhksyd