

TENANT APPLICATION FORM

NAME: _____ AGE: _____

HOME PHONE #: _____ CELL# _____

E-MAIL: _____

DRIVERS LICENSE NUMBER: _____

HOW MANY PEOPLE IS APT. FOR: _____

EMPLOYER: _____ HOW LONG: _____

POSITION: _____ SUPERVISOR: _____

WORK PHONE NUMBER: _____

CURRENT ADDRESS: _____ HOW LONG: _____

LANDLORD NAME: _____ PHONE #: _____

REASON FOR LEAVING: _____

ANY PETS: _____ DESCRIBE: _____

IN CASE OF EMERGENCY CONTACT: _____

HOME#: _____ WORK / CELL# _____

ADDRESS: _____

ALL ABOVE INFORMATION IS CONFIDENTIAL

I HAVE READ THIS TENANT APPLICATION AND ACCEPT ITS TERMS THAT A CONSUMER REPORT CONTAINING CREDIT CHEQUE AND/ OR PERSONAL INFORMATION MAY BE REFERRED TO IN REGARDS TO THIS APPLICATION.

DATED AT WINDSOR, ONTARIO THIS _____ DAY OF _____ 200 _____.

OWNER / MANAGER

TENANT

TENANT