

RENTAL APPLICATION

RENTAL INFORMATION

(a) Address 3565 Forest Glade Drive, Unit, Windsor ON	
(b) Unit Required 1 Bedroom 1 Bedroom + Den 2 Bedroom	
(c) Pets Cat Dog None Other	
Please provide a full description of the type, breed, size, weight, name, and physical appearance of a pet:	ny
(d) Parking Required?	
Yes No Outdoor (\$25) Covered (\$50)	
(e) Storage Locker Required (\$10)?	
○ Yes ○ No	
(f) Desired Term Commencement	
Desired Length of Term	
PERSONAL INFORMATION	
(a) Applicant's Full Name	
(i) SIN Number	
(ii) ID TypeID Number	
Date of BirthPhone Number	
Email Address_	

(b) Co-Applicant's Full Nam	e			
(i) SIN Number				
(ii) ID Type	ID Number	ID Number		
Date of Birth	Phone Nur	Phone Number		
Email				
(c) Other Residents (include	children)			
Name	Relationship	Age		
· <i>,</i>				
How long living there	Monthly Co	Monthly Cost		
Landlord Name	Phone Nur		/property tax/utilities)	
Reason for leaving				
(b) Previous Address				
How long living there	Monthly Co	Monthly Cost		
Landlord Name	Phone Nur	Phone Number		
Reason for leaving				
(c) Previous Address				
How long living there	Monthly Co	ost		
Landlord Name	Phone Nur	nber		
Reason for leaving				

EMPLOYMENT HISTORY

(a) Applicant's Current Employ	yment Status		
Full Time Part Time Student	Retired Unemployed Other		
(b) Applicant's Employer			
Employer Address			
Occupation/Title	Salary/Incom	e	
Supervisor/Manager	Phone Numbe	er	
Start Date	End Date		
Reason for leaving			
(c) Co-Applicant's Current Em	ployment Status		
Full Time Part Time Student	Retired Unemployed Other		
(d) Co-Applicant's Employer_			
Employer Address			
Occupation/Title	Salary/Incom	e	
Supervisor/Manager	Phone Numbe	er	
Start Date	End Date		
Reason for leaving			
OTHER INCOME/ASSI * For houses include only the equity,			
Income/Asset Type	Description	Amount/Value	
			-

FINANCIAL OBLIGATIONS

Туре		Monthly Payment	Balance
/1		, -, -	
OTHER INFORMATIO	ON		
	Automobi	les	
Make/Model	Year/Colou	r License Plate	e Province
Address			
Relationship	Phon	e Number	
COMMENTS			
Please use the space below application, including, but no or consumer proposal in the	ot limited to, any liens ag	gainst your assets, if	you have declared bankrup

REFERENCES

1. Name	Phone Number
Relationship	Length Known
2. Name	Phone Number
Relationship	Length Known
3. Name	Phone Number
Relationship	Length Known
	nation is true and complete, and I have not withheld any information relevant bood that the property management group and/or owner reserve the right to and understand these conditions.
Applicant Signature	Date
Co- Applicant Signature	Date
<u> </u>	o verify the information about me/us held by credit reporting agencies, that ed to rely on such credit reports as being correct, and I/we release any claim on that information.
report about me/us, to contact pervision contact agencies that provide landlor steps necessary to assess this rental or provide my/our irrevocable consent to cation and information arising from contact to the contact and information arising from the contact pervision and the contact pervision are contact pervision and the contact pervision and the contact pervision are contact pervision are contact pervision and the contact pervision are contact pervision are contact pervision and the contact pervision are contact pervision and the contact pervision are contact pervision are contact pervision are contact pervision and the contact pervision are contact pervision and contact pervision are contact pervision an	ion to the Landlord or its agents to obtain at any time a consumer/credit ous landlords to obtain information about my/our previous tenancies, to rd information, to contact my references, and to take any other reasonable application or for any amendment or renewal of my/our tenancy. I/we to the Landlord or their agents to disclose information from my rental applicant tenancy between us to any third party for the purpose of contributing information to be used in providing consumer/credit reports
Applicant Signature	Date
Co- Applicant Signature	Date
☐ I/we agree to allow Piroli Group providers such as BELL and Cogeco.	Developments to share my personal information with third party service (Please check box if you consent)
Applicant Signature	Date
Co- Applicant Signature	Date