

**APPLICATION TO RENT
LANDLORD'S REFERENCE AND INFORMATION SHEET**

ALOT Ltd.
P.O. Box 20175,
Belleville, Ontario, K8N 5V1
Phone (613) 848-5930 Fax (613) 962-8307
Internet: <http://www.cityview.reach.net>
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PLEASE PRINT

Date: _____ Date premises required: _____

Until: _____

Applicant's Social Insurance number: _____

Date of Birth: _____

Postal Code: _____

Spouse or roommate Social Insurance number: _____

Date of Birth: _____

Postal Code: _____

Applicant's full name: _____

Applicant's present residence: _____ Phone: _____

Present landlord: _____ Phone: _____

Address of premises to be rented: _____ Apt. No: _____

Type of apartment desired: 1 Bedroom 2 Bedroom

Number of adults to occupy apartment: _____ Number of children under 18: _____

Ages of children: _____ Pets to occupy apartment: _____

Parking space needed – amount: _____ x

Applicant is employed by: _____

Occupation: _____ Phone: _____

Average salary or annual income \$ _____ Supplementary income \$ _____

Former employer: _____

From: _____ to _____ Phone: _____

Spouse or roommate full name: _____

Employed by: _____

Occupation: _____ Phone: _____

Credit reference: (List bank, credit union, charge accounts, or other credit references.) (A) Applicants, (S) spouse / room-mate

Applicant: _____ Spouse: _____

Applicant: _____ Spouse: _____

Personal references:

Applicant: _____ Phone: _____

Applicant: _____ Phone: _____

Spouse: _____ Phone: _____

Spouse: _____ Phone: _____

Referred to landlord by: _____

Reason for leaving present address: _____

Have you ever been evicted presently from or previous tenancy: _____

Next of kin: _____ Address & phone: _____

IMPORTANT: Proposed tenants acknowledgment & please initial below,

First and last month rent will be required _____ Tenancy agreement for: minimum 6 month* _____ 12 month: _____

Signature required for Entrance/Exit doors, Apartment & Mailbox doors because of high security key control system: _____

IMPORTANT: Tenants with 6 month tenancy agreement, agree for carpet cleaning and painting cost if necessary.

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: _____