

P.A. Community Housing Society Inc.

401 - 13th Street East
Prince Albert, Sask. S6V 1E2

LANDLORD REFERENCE FORM

Phone # 306-922-5440
Fax # 306-922-4434

Name of Tenant(s) #1 _____ #2 _____

Address _____ City _____ Postal Code _____

Length of Tenancy: From D____M____Y____ To D____M____Y____ Number of Occupants _____ Adults _____ Children _____

RENT HISTORY <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Poor	HOUSEKEEPING SKILLS <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Poor	YARD CARE <input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Poor
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COMPLAINTS: ☐ Yes ☐ No How Many? _____ If Yes, what type? _____

NOTICE TO VACATE: ☐ Proper Notice Give ☐ Short Notice Given ☐ Eviction ☐ Other _____

LEASE VIOLATION NOTICES: ☐ Yes ☐ No How Many? _____ If Yes, what type? _____

DAMAGE DEPOSIT: ☐ Returned ☐ Not Returned

OUTSTANDING BALANCE UPON VACATING: \$ _____ Rent \$ _____ Damages \$ _____ Cleaning

COMMENTS _____

Certify that the above is true and correct.

Signature of Landlord

Printed Name of Landlord

Phone Number

Date