



RENTAL APPLICATION

For

Hope Street Real Estate Corp

Agent: _____ | c: _____ | f: _____ | e: _____

INSTRUCTIONS: Please complete all sections on both pages. Please print all information. Mark "N/A" in any blanks that do not apply.

Size Required: Bachelor 1 Bedroom 2 Bedroom 3 Bedroom 4 Bedroom **Pets:** None Cat Dog Other _____ # _____

Building Address	Unit #	Rental Rate	Date Required
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PERSONAL INFORMATION

Applicant's Full Name			H Phone #
First Name	Middle Initial	Surname	W Phone #
			Email:

SIN / DL/ Passport	Date of Birth	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law
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Co-Applicant's Full Name			H Phone #
First Name	Middle Initial	Surname	W Phone #
			Email

SIN / DL/ Passport	Date of Birth	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law
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Other Residents (Include Children)	Relationship	Age
1.		
2.		
3.		

RESIDENTIAL HISTORY

Present Address	How long there	Rent amount
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Landlord	Phone #	Reason leaving
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Previous Address	How long there	Rent amount
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Landlord	Phone #	Reason leaving
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Previous Address	How long there	Rent amount
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Landlord	Phone #	Reason leaving
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EMPLOYMENT HISTORY

Applicant's Employment History
Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other

Employer	<input type="checkbox"/> Current <input type="checkbox"/> Previous	Length of Employment
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Employers Address

Supervisor/Caseworker	Phone #	Income
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Co-Applicant's Employment History
Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other

Employer	<input type="checkbox"/> Current <input type="checkbox"/> Previous	Length of Employment
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Employers Address

Supervisor/Caseworker	Phone #	Income
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(CONTINUED ON OTHER SIDE)

LOANS

Institution	Address	Monthly Payment	Balance
1.			
2.			
3.			

AUTOMOBILES

Make / Model	Year / Color	License Plate Number	Province
1.			
2.			

OTHER INFORMATION

In Case of Emergency Contact		Phone #
Address	Relationship	

I hereby certify that the above information is true and complete and that I have not withheld any information relevant to this application. It is also understood that the property management and/or owner reserve the right to reject this application. I have read and understand these conditions.

Applicant Signature

Date

Co-Applicant Signature

Date

I/we know that I/we have the right to verify the information about me/us held by credit reporting agencies, that the landlord and its agents are entitled to rely on such credit reports as being correct, and I/we release any claim I/we may have arising from reliance on that information.

I/we hereby give irrevocable permission to the Landlord or its agents to obtain at any time a consumer/credit report about me/us, to contact previous landlords to obtain information about my/our previous tenancies, to contact agencies that provide landlord information, to contact my references, and to take any other reasonable steps necessary to assess this rental application or for any amendment or renewal of my/our tenancy. I/we provide my/our irrevocable consent to the Landlord or their agents to disclose information from my rental application and information arising from any tenancy between us to any third party for the purpose of contributing information to a database of tenant information to be used in providing consumer/credit reports.

Applicant Signature

Date

Co-Applicant Signature

Date

FOR OFFICE USE ONLY

REFERENCE VERIFICATION	APPLICATION	DEPOSITS	
<input type="checkbox"/> Present Address* <input type="checkbox"/> Previous Address <input type="checkbox"/> Employment* <input type="checkbox"/> Co-Resident <input type="checkbox"/> TenChek* *required	<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved _____ Date Initials Date of Occupancy	_____	_____
		_____	_____
		Date	Amount