

APPLICANT INFORMATION

PERSONAL INFORMATION First Name(s) Last Name(s) SECONDARY APPLICANT PRIMARY APPLICANT SECONDARY APPLICANT PRIMARY APPLICANT Middle Initial(s) S.I.N. Number(s) PRIMARY APPLICANT SECONDARY APPLICANT PRIMARY APPLICANT SECONDARY APPLICANT Date of Birth (dd/mm/yyyy) Home Phone and/or Cell Phone Number(s) PRIMARY APPLICANT PRIMARY APPLICANT SECONDARY APPLICANT SECONDARY APPLICANT Work Phone Number(s) Email(s) PRIMARY APPLICANT SECONDARY APPLICANT PRIMARY APPLICANT SECONDARY APPLICANT RESIDENCE HISTORY **Current Address** City/Province Landlord Phone Landlord Name Length of Tenancy Reason for Leaving Previous Address City/Province Landlord Name Landlord Phone

Reason for Leaving

Length of Tenancy



APPLICANT INFORMATION

EMPLOYMENT INFORMATION (PRIMARY)

Current Employer				
Address		City/Province		
Phone Number		Length of Employment		
Occupation		Annual Salary		
Previous Employer				
Address		City/Province		
Phone Number		Length of Emplo	yment	
Occupation		Annual Salary		
REFERENCES (NOT A RELATIVI				
Full Name	Phone Number		Relation	
Full Name	Phone Number		Relation	



APPLICANT INFORMATION

EMPLOYMENT INFORMATION (SECONDARY)

Current Employer				
Address		City/Province		
Phone Number		Length of Employment		
Occupation		Annual Salary		
Previous Employer				
Address		City/Province		
Phone Number		Length of Emplo	yment	
Occupation		Annual Salary		
REFERENCES (NOT A RELATIV			Dolation	
Full Name	Phone Number		Relation	
Full Name	Phone Number		Relation	



APPLICANT INFORMATION

ADDITIONAL OCCUPANTS				
Full Name		Date of Birth (dd/mm/yyyy)		
Full Name		Date of Birth (dd/mm/yyyy)		
Full Name		Date of Birth (dd/mm/yyyy)		
EMERGENCY CONTACT				
Full Name	Phone Number		Relationship	
Full Name	Phone Number		Relationship	
UNIT INFORMATION				
Unit Applying For				
Start Date (dd/mm/yyyy)		End Date (dd/m	m/yyyy)	
Monthly Rent Charge		Parking Space C	harge	
Other Charges		Total Per Month		
Total Deposit Given		Type of Deposit	Given	
		Certified cheque p	payable to: Uniform Boundstone Apartments LTD.	



SIGNATURES

Proof of tenant liability insurance must be produced before	Initials	Initials						
No smoking is permitted in the units or in the common are	Initials	Initials						
given by the Applicant(s) that the sum of \$ given by the Applicant(s) to the Landlord is to be eld as a Last months Rent Deposit.								
I/We agree that upon acceptance of this Rental Application. Agreement incorporating the above terms into the Landlor towards the rent of the last month's occupancy. If I/We fair other rights accruing to the Landlord, I/We shall agree that	d`s usual form, in which event t I to enter upon such Tenancy A	he deposi	it shall be applie	ed				
By signing this application, I hereby give permission to the employers, previous landlords or to take any other reasonal				act				
I/We acknowledge receiving a copy of this rental application landlords to release any and all information in their file regardapplication.			-	ous				
I have reviewed the above information and confirm that it i								
affirm that all representations I have made in relation to this verification, are true, accurate and complete to the best of		ched inco	me and employ	ment				
Applicant Signature (Primary)	Witnes	s Signatur	е					
Applicant Signature (Secondary)	Date (de	d/mm/yyy	у)					
The Landlord hereby accepts this Rental Application for the premises as herein described.								
Date (dd/mm/yyyy)	Landlord Ac	knowledg	ement					