



2-506

LASALLE

RENTAL APPLICATION INSTRUCTIONS



**ADAM & PAM
HAIGHT**
SELL HOMES

Step 1:

Complete the attached application and send to connect@livesudbury.ca. Only fully completed applications will be considered.

Step 2:

If your application is selected, we will require a SingleKey report (you will be responsible for the cost).

Step 3:

If you are selected after Step 2, Adam and Pam Haight will be in contact to draft a lease agreement.

OF NOTE:

- One parking spots are assigned, no other spots available
- All tenants are required to have tenant insurance secured prior to moving into the unit
- A minimum of a 1 year lease is required

Rental Application Residential

Form 410

for use in the Province of Ontario

I/We hereby make application to rent **506 Lasalle Blvd** **2** **Sudbury** **P3A1W9**

from the day of 20..... at a monthly rental of \$..... **1,500.00**

to become due and payable in advance on the day of each and every month during my tenancy.

1. Applicant #1 Date of birth SIN No. (Optional)
Drivers License No Occupation

2. Applicant #2 Date of birth SIN No. (Optional).....
Drivers License No Occupation

3. Other Occupants: Name Relationship Age
Name Relationship Age
Name Relationship Age

Do you have any pets? If so, describe

Why are you vacating your present place of residence?

APPLICANT #1 LAST TWO PLACES OF RESIDENCE

Present Address

From To

Name of Landlord

Telephone:

Prior Address

From To

Name of Landlord

Telephone:

APPLICANT #1 PRESENT EMPLOYMENT

Employer

Business address

Business telephone

Position held

Length of employment

Name of supervisor

Current salary range: Monthly \$

APPLICANT #2 LAST TWO PLACES OF RESIDENCE

Present Address

From To

Name of Landlord

Telephone:

Prior Address

From To

Name of Landlord

Telephone:

APPLICANT #2 PRESENT EMPLOYMENT

Employer

Business address

Business telephone

Position held

Length of employment

Name of supervisor

Current salary range: Monthly \$

APPLICANT #1 PRIOR EMPLOYMENT

Employer
Business address
Business telephone
Position held
Length of employment
Name of supervisor
Salary range: \$

APPLICANT #2 PRIOR EMPLOYMENT

Employer
Business address
Business telephone
Position held
Length of employment
Name of supervisor
Salary range: \$

Name of Bank Branch Address
Chequing Account # **N/A** Savings Account # **N/A**

FINANCIAL OBLIGATIONS

Payments to Amount: \$
Payments to Amount: \$

PERSONAL REFERENCES

Name Address
Telephone: Length of Acquaintance Occupation
Name Address
Telephone: Length of Acquaintance..... Occupation.....

AUTOMOBILE(S)

Make Model Year Licence No
Make Model Year Licence No

The Applicant consents to the collection, use and disclosure of the Applicant’s personal information by the Landlord and/or agent of the Landlord, from time to time, for the purpose of determining the creditworthiness of the Applicant for the leasing, selling or financing of the premises or the real property, or making such other use of the personal information as the Landlord and/or agent of the Landlord deems appropriate as is consistent with the leasing, selling or financing of the premises or the real property.

The Applicant represents that all statements made above are true and correct. **The Applicant is hereby notified that a consumer report containing credit and/or personal information may be referred to in connection with this rental.** The Applicant authorizes the verification of the information contained in this application and information obtained from personal references. This application is not a Rental or Lease Agreement. In the event that this application is not accepted, any deposit submitted by the Applicant shall be returned.

..... (Date) (Signature of Applicant #1) (Date) (Signature of Applicant #2) (Date)
Telephone: Telephone:
Email Address: Email Address: