

Rental Information

Rental Address:		City:	Postal Code:		
Total amount: \$	Share of rent: \$	Move in Date:	2024		
Applicants Informa	ation				
First Name:	st Name: Last Name:				
Email Address:		Phone Number:			
Date of Birth: Day	Month Year	SIN:			
Ever been Evicted? 🗆 Ye	s 🗆 NO				
Ever been convicted o	f a crime/felony? □ Ye	s 🗆 No			
Ever caused property	damage? □ Yes □ No	This excludes to	affic tickets		
Other Occupants P	aying Rent				
Full Name	E	mail:			
Relationship	E	Share of	of Rent		
Lived Together Before:	☐ Yes ☐ No Length of	of Relationship			
Full Name	Е	mail:			
Relationship	E	Share of	of Rent		
Lived Together Before:	Yes No Length	of Relationship			
Dependent's					
Name	Age:	Relationship			
	Age:				
	Age:				
	Age:				
Vame	Age:	Relationship			
Pets					
Cat: □ Dog□ Other	Breed	How man	ny		

 $Telephone: (519)\ 890\text{-}5245 \quad or \quad Email: h2hproperties@gmail.com$

Vehicles: How ma	any This this Vehicle on Finance			
Make:	Model Monthly Payments amount			
Rental Address I	History			
Address	City	Postal Code		
Dates: Move-in:	to Move-out SI SI			
Length of Stay	Type of Housing Sl	nare of Rent		
Property Ownership)			
Reason for Moving				
Landlord Name	Landlord Ph	one		
Landlords Email:_	Permission to	Permission to Contact□Yes □No		
Address	City	Postal Code		
Dates: Move-in:	to Move-out	1 ostai code		
Length of Stav	to Move-out Sl	nare of Rent		
Property Ownership	0			
Reason for Moving				
 Landlord Name	Landlord Phone			
Landlords Emaill:	Permission to	Contact \(\text{Yes} \) \(\text{No} \)		
Editaroras Emani		7 6011		
Address	City	Postal Code_		
Dates: Move-in:	Move-out SI SI			
Length of Stay	Type of Housing Sl	nare of Rent		
Property Ownership				
Reason for Moving				
Landlord Name	Landlord Ph	one		
	Landlord PhonePermission to Contact□Yes □No			
		7 0011		
Present income	Source			
	e Source			
Address	Ct. ID.	Position		
After Tax Income_	Start Date:	End Date:		
	_ Income Source: □ Employed □ Self-employ			
Supervisor	Phone: Pern	nission to Contact∟Yes ∟No		
Company / Incom	e Source			
Address		Position		
After Tax Income_	Start Date:	End Date:		
	_ Income Source: □ Employed □ Self-emplo			
	Phone: Pern			

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Past Income Sources

Comp	oany / Incom	e Source		
Addre	ess		Position	
After '	Tax Income_	Start Date:	End Date:	
Incom	ie Type	$_$ Income Source: \Box Employed \Box S	elf-employed Retired Government	
Super	visor	Phone:	Permission to Contact□Yes □No	
Comp	oany / Incom	e Source		
Addre	ess		Position_	
After '	Tax Income_	Start Date:	Position End Date: elf-employed □Retired □Government	
Incom	е Туре	$_$ Income Source: \Box Employed \Box S	elf-employed □Retired □Government	
Super	visor	Phone:	Permission to Contact□Yes □No	
applic to pull detern mainta	ation. I give to a my credit re nine my residation in the rental	port, contact references and perform lential rental history, court, financial h unit and premises. I agree to and requ	entative, or property manager, permission	
Docu	ments			
		ast have applicants full name and dater adults who will be assisting in the		
		one of the following Identification: river's License or Photo ID – Health	cards not acceptable	
	2. Proof of income Letter of Employment and/or Pay slip – Issued within the last 30 days.			
	3. Bank Sta Full Month	atement: – no screenshots. Must have full nam	ne – Hide account number	
This	Free credit	Report Statement report - https://www.creditkarma.ca must be the full report and will not de	amage or add points to your credit score*	

Please submit all 4 documents at the time of Sending in the application otherwise the application will not be processed.

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