WESTCOURT PLACE

99 Chatham Street East
Windsor, Ontario N9A 6V1
Telephone: (519) 254-2200 Fax: (519) 254-1566
Email: donnaheyden_westcourt@yahoo.ca

RENTAL APPLICATION

	Date:	
PLEASE PRINT CLEARLY		SOCIAL INSURANCE NUMBER
NAME (S) M		
M		
M		
PREMISES APPLIED FOR:		
SuiteTy	ype	
Address		
Parking	under ground	
PROPOSED OCCUPANTS		
NAME(S)	AGE	DATE OF BIRTH &YEAR
DETAILS OF OCCUPANCY:		
Term to commence	20 Term	to end20
PAYMENT INFORMATION		
A pro-rated rent of \$	will be pa	id in advance to cover the period from
20	_ to	20
MONTHLY RENTAL \$_		_PRO-RATED RENT \$
PARKING UNDERGROUND \$	5	FIRST MONTHS RENT \$
MONTHLY TOTAL \$_		_PREPAID LAST MONTH
Monthly total payable to the Lar	ndlord or his agent in adv	vance on the first day of each month.
the event that the applicant does not tal the standard lease agreement when pre	ke occupancy on the commen sented for execution. Upon the	be considered as a rental deposit, forfeitable, in cement date as agreed upon or fails to execute the applicant taking possession o the apartment, per the Ontario Tenant Protection Act., Bill 96.
WHAT MADE YOU CHOOSE TH	HIS ACCOMMODATION	:
NEWSPAPERREFERRAL	SIGNYELLOW PAGE	ESOTHER

APPLICANT
ADDRESS
HOME PHONE #
LANDLORD
HOW LONG
PHONE #
PREVIOUS ADDRESS
HOW LONG
LAST LANDLORD PHONE #
EMPLOYED
ADDRESS
PHONE #
PERSON TO CONTACT
LENGTH OF EMPLOYMENT
POSITION
PREVIOUS EMPLOYER
PHONE #
MAKE OF AUTO
YEARCOLOUR
DRIVER'S LICENSE #
REFERENCES
NAME(S)
PHONE #(S)
IN CASE OF EMERGENCY, CONTACT
RELATIONSHIP
PHONE #
THE UNDERSIGNED CERTIFIES THAT THE ABOVE INFORMATION IS COMPLETE AND CORRECT AND AUTHORIZES THE LANDLORD TO CONDUCT A PERSONAL INVESTIGATION/CREDIT CHECK.
ACTIONIZES THE EMPLOYD TO CONDUCT AT ENSONAL INVESTIGATION/CREDIT CHECK.
APPLICANT'S SIGNATURE DATE