Agents Name: Michael Ragosin 604.6440550 Cell

604.263.2291 Fax

Rental Application Form

Applicants Personal Information				Application Date			
First Name	Last N	Name	Telephone Numbers				
			Area C	ode	Area Code		
			(H)		(W)		
			Area C	ode	Area Code		
			(H)		(W)		
S.I.N	Divers License #	Divers License #		Other ID	Other ID		
Bank / location		Credit Cards Card No.					
Recent History							
2 years most recent rental history							
Landlords Name	Landlords Telephone			lress	Period Rented		
		Address			From	То	
		City/Prov			/ /	/ /	
		Address			From	То	
		City/Prov			/ /	/ /	
Employment History							
Company Name	Supervisor Name	Telephone Num	ıber	From	То	Monthly Sala	
D '4'				/ /	/ /	\$	
Position							
Doc'tion				/ /	/ /	\$	
Position	iduals intending to occupy the	1		(3	(21-)		
Do <u>any</u> of the findiv		ne property noke?		(1	Yes) (No)		
		ive Pets or intend to	o have p	ets?			
Total number of persons inte	ending to occupy the property	y (include children	or expe	ecting children			
Estimated length of stay or re	ental period?						
CREDIT HISTORY				2.10			
A recent credit history report					Data		
If you are not attaching a cre EQUIFAX CANADA IN				100 – 11:00am			
A copy of your credit report						рш	
This fee will be credit back t							
Driver's License(s) or other pictu		sit ii your appireati	011 15 40	cepted for tendine.	<i>y</i> •		
A photocopy of each applica		se or passport (or o	ther off	icial ID) is require	ed with the appli	ication.	
The above ward and break							
The above named applicant using anytime at their option, term							
this application will form par				in the future. An	y imormation pr	ovided on	
The applicants listed above a	also consents to the landlord	's agent conducting	g the fol	lowing reference	checks		
	ory Check with a credit repo						
	ent history check with curren						
	tory Check with previous lan	ndlords.					
	sidence inspection check:						
5.							
Signature of applicant							

Applicant Deposit