



Application Form 410
RESIDENTIAL

Rental Address: _____ **Date:** _____

1. Name: _____ Date of Birth: _____

Social Insurance Number (optional) _____ Drivers Licence Number: _____

2. Name: _____ Date of Birth: _____

Social Insurance Number (optional) _____ Drivers Licence Number: _____

Please be advised not providing your social insurance number does not interfere with our ability to perform a credit check.

Other occupants:

Name: _____ Date of Birth: _____ Relationship: _____

Name: _____ Date of Birth: _____ Relationship: _____

Name: _____ Date of Birth: _____ Relationship: _____

How many pets will be living with you in the rental? Dogs: _____ Name breed(s): _____ Cats: _____

Other pets you own that will be living with you in the rental unit _____

Has your pet ever been involved in causing personal harm or damage? Explain _____

How many smokers (including cigarette and cannabis) will be living in the rental unit? _____

Applicant 1 Name: _____ **Applicant 2 Name:** _____

COMPLETE CURRENT RENTAL ADDRESS

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Time period From: _____ To: _____

Name of Landlord: _____

Phone Number of Landlord: _____

2nd Previous Rental Address: _____

Time period From: _____ To: _____

Name of Landlord: _____

Phone Number of Landlord: _____

COMPLETE CURRENT RENTAL ADDRESS

Street Address: _____

City: _____ Province: _____ Postal Code: _____

Time period From: _____ To: _____

Name of Landlord: _____

Phone Number of Landlord: _____

2nd Previous Rental Address: _____

Time period From: _____ To: _____

Name of Landlord: _____

Phone Number of Landlord: _____

PRESENT EMPLOYMENT

Position: _____

Employer: _____

Address: _____

Business Contact Info: _____

Year Started: _____ Year Ended: _____ or Current Employment

Supervisor: _____

Phone Number of Supervisor: _____

Amount earned annually \$ _____ Monthly \$ _____

PRESENT EMPLOYMENT

Position: _____

Employer: _____

Address: _____

Business Contact Info: _____

Year Started: _____ Year Ended: _____ or Current Employment

Supervisor: _____

Phone Number of Supervisor: _____

Amount earned annually \$ _____ Monthly \$ _____

PRIOR EMPLOYMENT

Position: _____

Employer: _____

Address: _____

Business Contact Info: _____

Year Started: _____ Year Ended: _____ or Current Employment

Supervisor: _____

Phone Number of Supervisor: _____

Amount earned annually \$ _____ Monthly \$ _____

PRIOR EMPLOYMENT

Position: _____

Employer: _____

Address: _____

Business Contact Info: _____

Year Started: _____ Year Ended: _____ or Current Employment

Supervisor: _____

Phone Number of Supervisor: _____

Amount earned annually \$ _____ Monthly \$ _____

Reason for seeking a new rental: _____

REQUIRED/REQUESTED MOVE-IN DATE: _____

Applicant 1 Name: _____ **Applicant 2 Name:** _____

UTILITY INFORMATION
Have you ever had a delinquent water account? YES NO
If yes, what is the current balance? _____
Name on the account? _____
List the account number(s) _____

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Have you ever had a delinquent water account? YES NO
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ALL FINANCIAL OBLIGATIONS
Payments to: _____ Amount: _____
Payments to: _____

ALL FINANCIAL OBLIGATIONS
Payments to: _____ Amount: _____
Payments to: _____

OTHER SOURCES OF INCOME – IF APPLICABLE
Source of Income: _____
Contact Name & Number: _____
Amount earned annually \$ _____ Monthly \$ _____

OTHER SOURCES OF INCOME – IF APPLICABLE
Source of Income: _____
Contact Name & Number: _____
Amount earned annually \$ _____ Monthly \$ _____

VEHICLE
Make: _____ Model: _____
License Plate Number: _____
Fully Owned? _____ Leased? _____ Amount Owing: _____

VEHICLE
Make: _____ Model: _____
License Plate Number: _____
Fully Owned? _____ Leased? _____ Amount Owing: _____

Additional information you would like to include (optional): _____

The applicant(s) represents that all statements made above are true and correct. The applicant(s) is/are hereby notified that a credit report containing credit and/or personal information may be referred to other involved parties and their associates and/or institutions before, during, and after tenancy in connection with this rental. The applicant(s) provide(s) consent that Koor Property Management Ltd. can verify any accounts past, current, or previous with any utility company before, during, or after tenancy. The applicant(s) authorize(s) the verification of all the information contained in this application and information obtained from personal references, which includes contacting previous and current landlords, family, employers, and a criminal background check before, during, and after tenancy. This application is not a Rental or Lease Agreement. Any false information will constitute grounds for rejection of this application, or management may at any time immediately terminate any agreement entered into reliance upon misinformation given on the application. **Please be advised** investors of Koor Property Management Ltd. are employed in the divisions of Ontario Works and ODSP programs. It is therefore possible that any information on this application will be viewed by such employees and shared with said organization before, during, and after tenancy.

Signature of Applicant 1 Date Home Phone Cell Phone

Signature of Applicant 2 Date Home Phone Cell Phone