

Questions for Applicants

| First Name | |
|--------------------|---|
| Last Name | |
| Address: | |
| City/Postal Code: | |
| Home Phone | Cell Phone |
| Email | |
| I am interested in | renting at the following address: |
| | Do You Currently Rent? |
| | How Long Have You Lived in Your Current Home? |
| | Does Your Current Landlord Know You Are Planning to Move? |
| | Have You Ever Been Convicted of a Crime? |
| | What Date Would You Want to Move In? |
| | Why are you looking at Moving Out of your Current Address? |
| | How Many People Would Be Living with You? |
| | How Many People Living with You Smoke? |
| | How Many Parking Spaces Would You Require If You Rent Here? |
| | Do You Have Any Pets? |
| _ | Can You Provide Landlord References? |

Once you have completed the list of questions, please send the form back to MD Leasing & Property Management via email: md@mdleasingpmcompany.ca. I will reach out to you with a date and time that is convenient for the both of us. If you wish to proceed with the Application for renting, please let me know and once this form is completed and approved I can send you the application form before booking the viewing.