

Confidential Application for Long Term Accommodation

		confidential Application for L	20119 1 01111	Number of Bedrooms Required
				•
	T	A 19 44	1	
		Applicant 1		Applicant 2
Name				
Birth Date				
Address on DL				
Town/City				
Postal Code				
Home Phone				
Cell Phone				
Work Phone				
Occupation				
How long at present job				
Approx Month				
If yo	u are retired and	l living on a pension you will be	required to	provide verification of your pension(s)
Employer				
Work				
Contact				
Phone				
Vehicle				
Plate Number				
DL Number				
Name of				
Bank				
Address				
Do You Smoke?				
	ningre (under 10) who will occupy the property		
Names of all fi	imors (under 19) who will occupy the property		
How long have you been at your current address?				Have you given notice yet?

Reason for leaving:								
Current Landlord's Name			Phone Numbers					
Current Rent Does this include utilities		1	If yes, which ones?					
Previous Address								
Previous Landlord	bers							
If you have just sold your proper	ty, provide address.							
References, other than relatives or employers. If you are self employed, provide the name of at least one client.								
Name	Jovide the	Phone Numbers						
Name		Phone Numbers						
In case of an emergency, notify		Phone Numbers						
Relationship								
	NOTES TO	APPLICANT	ΓS					
•	offers no agency representation before entering into any agr	ation to the A reement if that	pplicant(s) at is import					
best of my knowledge, accurate. purposes consistent with the asse information about me to Kimber	I hereby consent to obtaining essment of my application. I ley Rentals. All personal in sed or made anonymous wh	ng employme I authorize the formation colors en the use of	ent or person e reporting llected shall the inform	e above information is true and, to the onal information about myself for all agencies and other persons to disclose ll be kept confidential, in a secure ation has been fulfilled. Kimberley.				
In the event this application is the information provided.	declined, no reason need	be stated. I	(we) ack	nowledge that approval is based on				
Signature Applicant 1	Signature Applicant 2							
Date	Date	Date						
In Accordance with the personal	information protection act,	all information	on will be l	kept confidential and adequately				

protected unless otherwise ordered by a government agency.

Return completed forms to manager@northstarmountainvillage.com

Allow 3-5 business days for processing – incomplete applications may not be processed