

OLIGNY & THIBODEAU INVESTIGATION SERVICE

200 McDonald, Suite 402, Saint-Jean-sur-Richelieu, Québec, J3B 8J6

C.P. 532, Saint-Jean-sur-Richelieu, Québec, J3B 6Z8

TÉL. : (450) 348-1519, FAX : (450) 348-5695

WWW.OLIGNY-THIBODEAU.COM

PRE-RENTAL REFERENCE

Date : _____

-A- CLIENT OR OWNER

Name (Company or individual):		Telephone :
Address :		Fax :
Rental address :	Effective date of the lease :	Amount of monthly rent :
The new lease will be jointly and severally responsible with :		
Number of occupants : Adults :		Children :

-B- CANDIDATE

Name:		First name :
Date of birth : dd/mm/yy	Social Insurance number :	Tel. : ()
Present address: street	city	prov.
		Postal code :
Expiry date of the lease :	How long have you lived at this address :	Amount of rent:
Lease in your name: yes _ no _	Name of present owner :	Owner's phone number : ()
Previous address : street	city	prov.
		Postal code:
Lease in your name: yes _ no _	Name of previous owner :	Owner's phone number : ()

-C- EMPLOYER REFERENCE

Name of your present employer :		
Employer address : street	city	prov.
		Tel. : ()
Type of job :	Since how long :	Net monthly salary :
Name of your previous employer :		
Employer address : street	city	prov.
		Tel. : ()

-D- BANK

Your bank name :	Tel. : ()	
Address : street	city	prov.
		Account #

-C- FAMILY REFERENCES (MANDATORY)

Name :	Address :	Tel. : ()
Name :	Address :	Tel. : ()

I authorise Oligny & Thibodeau investigative Service and the landlord named above to obtain all necessary information from my financial institution, my employer and others in order to ascertain my solvability. I also authorise them to communicate credit experience information concerning the undersigned, to all lenders, credit bureaux or all other service suppliers and this for the duration of the contract.

Signature : _____

Personnel information agent number : 07790000074

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