

GUARANTOR APPLICATION

ALL INFORMATION MUST BE FILLED OUT AND SUPPORTING DOCUMENTS ATTACHED.

I agree to be the guarantor for the following applicants: (put the full names of ALL applicants)						
Rental Addres	ss:					
My Full Name	2:					
Date of Birth (month/day/year)	S.I.N				
Driver's Licenc	ce Number/ Provincial Photo ID Numb	er				
Phone Numbe	er					
Email Address						
CURRENT ADI						
Apt #, Street A	Address					
City	Postal Code	How long?				
Your present Monthly Rent/Mortgage Payment						
Do you:	Do you: Rent (Please provide a current utility/phone bill with your name and current address)					
	Own $\ \square$? (Please provide your most	recent property tax bill)				
Your current la	andlord information (MANDATORY if	you rent):				
Name/Compa	ny	Phone				
PREVIOUS AD						
•	Address					
		How long?				
Your Monthly Rent/Mortgage Payment Did you Rent Own ?						
Reason for lea	aving					
Your previous landlord information (MANDATORY if you rented):						
Name/Company		Phone				

EMPLOYMENT INCOME					
Name of Employer		Phone			
How long have you worked there? _	Your no	et income per pay period	\$		
I am full time □ part time □	l am paid We	eekly Bi-weekly	Monthly		
AND/OR I receive monthly benefits	<u>:</u>				
□ Canada Pension	Monthly Bene	Monthly Benefit			
□ Old Age Security	Monthly Bene	Monthly Benefit			
□ Other	Monthly Inco	Monthly Income			
VEHICLE		Carlana ann alla			
Year, Make/Model		Car loan monthly an	10unt		
BANKING INFORMATION					
Bank Name	Locatio	Location			
Branch transit #	Acct # _				
PERSONAL REFERENCES (MANDATORY, No family members)					
Name	Phone	Relationship			
Name	_ Phone	Relationship_			
PERSONAL REFERENCE (MANDATORY, family only)					

Copies of supporting documents that MUST be included with this application: *WITHOUT ALL REQUIRED DOCUMENTATION, THE APPLICATION WILL BE DENIED.

- * Drivers Licence, Provincial ID or Health Card (cannot be expired) front and back
- * Statements of Income for all income sources employment and/or alternative income sources –provide 3 stubs for each income
- * Copy of current utility/phone bill with your name & current address (if you rent)
- * Copy of your most recent property tax bill with your name & current address (if you own)
- * Screenshot of your credit score (a credit report may be required at a later stage of the review)

Guarantor. Shared consent.	information is confidential and will not be released to anyone without the Guarantor's
Name (please print)
Signature	
Date	
Please return ap	plication in person to: Janssen Property Management
	Unit #1, 744 Grand Ave E, Chatham ON
Or by mail to:	Janssen Property Management
	P.O. Box 955, Stn Main, Chatham, ON N7M 5L3
Or by email to:	janssenpropertymanagement@gmail.com
Office Hours:	Monday – Friday: 9:00 AM – 4:00 PM
	Saturday – Sunday: CLOSED
Phone Number:	519-351-7526
Website: https:/	//janssenpropertymanagement.ca

The Guarantor declares all the above information to be true. The Guarantor authorizes Janssen Property

Management to contact references or employment for the purpose of determining eligibility of the