

# Miners Landing Apartments

Email: [residentmanager@minerslanding.ca](mailto:residentmanager@minerslanding.ca) Tel: 902-300-6579

## APPLICATION TO RENT

Each individual occupant who will be responsible for rent must complete a separate application form. Please complete all sections on all pages and email to the email address above.

Building Address		Unit #	Rental Rate \$ _____ /month	Move in date Required:
PERSONAL INFORMATION				
Full Name: First                      Initial                      Last Name			H Phone # C Phone # W Phone # Email:	
SIN	Date of Birth		Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Common Law	
OTHER RESIDENTS (INCLUDING CHILDREN)			RELATIONSHIP	AGE
1.				
2.				
3.				
RESIDENTIAL HISTORY				
Present Address:			How long there:	Rent amount:
Landlord	Phone #	Reason for leaving:		
Previous Address:			How long there:	Rent amount:
Landlord	Phone #	Reason for leaving:		
EMPLOYMENT HISTORY				
Employment Status: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Unemployed <input type="checkbox"/> Other				
Employer			<input type="checkbox"/> Current <input type="checkbox"/> Previous	Length of Employment
Employers Address				
Supervisor/Caseworker			Phone #	Income

REFERENCES & OTHER INFORMATION		
Bank Reference		Address
Checking Acct #		Savings Acct #
Professional Reference (Must not be a family relation or friend)	Name	Phone #
Professional Reference (Must not be a family relation or friend)	Name	Phone #

Do you have any Pets? Y/N	If yes, what kind:	Size/weight:
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VEHICLES			
MAKE / MODEL	LICENSE PLATE NUMBER	YEAR / COLOR	PROVINCE
1.			
2.			

EMERGENCY INFORMATION (SOMEONE NOT RESIDING WITH YOU)	
(Name, address and phone number required)	Relationship

**OTHER INFORMATION**

I hereby certify that the above information is true and complete and that I have not withheld any information relevant to this application. If accepted, I/we undertake to execute a yearly lease in the approved standard form of the province. If, after being notified of acceptance, I/we cancel this agreement to occupy, the security deposit is forfeited as liquidated damages and not as a penalty. It is the responsibility of the tenant to insure his/her unit and its contents. It is also understood that the property management and/or owner reserve the right to reject this application. I have read and understand these conditions.

I/we hereby give permission to the Landlord or their Agent(s) to obtain at any time a consumer/credit report about me/us, to contact previous landlords to obtain information about my/our previous tenancies, to contact agencies that provide landlord information, to contact my references, and to take any other reasonable steps necessary to assess this Rental Application, or for any renewal or extension of my/our tenancy, or pursue any future outstanding debt.

The landlord requires a Pre-Authorized Debit Agreement in the amount of the monthly rent and extra charges (where applicable), plus the security deposit, prior to signing the lease.

Note: Upon execution of the lease and occupancy of the premises by the tenant, the deposit shall become the Security Deposit.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date