

Monthly Rent: \$ \_\_\_\_\_

Date Rent Starts:

| 1036 - 10 Avenue S.W. Calgary, Alberta T2R 1M4 Telephone: (403) 237-8600 Facsimile: (403) 290-1530

## RENTAL APPLICATION

www.emeraldmanagement.com

Pro rated Rent: \$\_\_\_\_\_\_\_
Parking: No \_\_\_\_/Yes \_\_\_\_ Rate: \$\_\_\_\_\_\_

## **PLEASE PRINT**

Date:	Address of Prope	rty Required:	
			D.O.B.:
Present Address:		Postal Code:	Phone:
Email:		Phone:	Phone:
Present Landlord:		Phone:	Years:
			Years:
Previous Landlord:		Phone:	
Number of children:	Ages:		
Bank:	Branch:	Acct.	No.:
Employed by:		Address:	
Telephone No.:	Position Held:	Salar	y: Years:
Previous Employer/Ph.No.:		Position:	Years:
Driver's Licence No.:		Social Insurance	e No.:
Co-Applicant Name:			D.O.B.:
NOTE: Co-Applicant must cor	mplete separate Rental Ap	plication Form.	
CREDIT REFERENCE (Credit	Cards, Loans)		
1		3	
2			
PERSONAL REFERENCES (N	ame & Telephone Number		
1		3	
2			
Next of Kin (Name & Telephon	e Number)		
Do you require parking?	Car Make:		Year:
Colour:	License No.:		Province:
verify information that has been c) agree or as required by law, that persons with whom I have or pro of providing rental and credit his	Management & Realty Ltd. to ob- given by me to aid in the proces Emerald Management & Realty opose to have financial dealings story; without further notice, can be de	ssing of my rental application; Ltd. may disclose information, , my employer, previous landlo posited by Emerald Managem	me, to perform a credit check, and to about me to credit bureaus, other ords and future landlords, for the purpose tent & Realty Ltd. upon their approval of
Signature:			
EMPLOYEE USE ONLY			
Date of Occupancy:		Security Deposit: 9	\$
Lease Period Ends:		Date Received:	