APPLICATION

(1)

(2)

NORTHRUP HOLDINGS LTD	ДΑ	ADDRESS APPLYING FOR:				
APPLICANT:		SIN:				
		# Of Children: Ages:				
Do You Have Pets?	Please Sp	ecify Type/Numb	oer:			
Does anyone moving in Smoke	:?E	mail:				
CURRENT ADDRESS:						
Street Address:		How Lo	ng?	Yrs	Mths	
Home Phone:						
Reason for Leaving?						
		Plate Number:				
PLACE OF EMPLOYMENT:						
Company's Name:	Empl	oyer's Name:		Phone:		
Occupation:						
Income per Month:						
NAME OF SPOUSE:		SIN	ıl•			
Company's Name:						
Occupation:						
Income per Month:						
PREVIOUS <u>LANDLORD</u> REFEREN Name:						
Rented From:						
Name:					_	
Rented From:					_	
NEXT OF KIN (NOT OCCUPYING	G APARTMENT):					
Name:						
Relationship:		one:				
I/We hereby give permission t I/we may receive electronic a products/services and incention	and/or telemarketing mes	sages/calls regai	rding one or	more of Bell	Aliant's communicat	
If approved there will be a \$50	00.00 hold fee that is non-r	efundable and i	t will be ded	lucted from the	e 1 st month's rent	
TO THE BEST OF MY KNOWLED	GE THE ABOVE INFORMAT	ION IS TRUF:				
Signature of the Applicant: X_			Date:			

By signing this document, I/we hereby consent to the use of the above information to determine my/our suitability as tenants. I/we understand that this information may be verified by contacting my/our previous landlord or other references given.

Where Did You Hear About Us? (Please Circle) Newspaper Friend Sign On Building Website Other