## **Green Star Properties Limited Rental Application**

Dartmouth, Nova Scotia, 440-7693

| Please complete all sections on both pages. Please print all information. Mark "N/A" in any blanks that do not apply. |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
|---|------------------|-------------------|-----------------|-----------------------------|-----------------|----------|----------------------|--------|--|--|--|
| APARTMENT SIZE REQUIRED:  | □ Bachelor       | ☐ 1 Bedroom       | □ 2 B           | Bedroom                     | ☐ 3 Bedroom     |          |                      |        |  |  |  |
| Building Address  | Unit #           |                   |                 | Rental                      |                 |          | Date Req'd           |        |  |  |  |
|   |                  | PERSO             | ONAL INFO       | ORMATIC                     | Rate            |          |                      |        |  |  |  |
| APPLICANT'S Full Name:  |                  |                   |                 |                             |                 | Home     | Phone                |        |  |  |  |
| First   | Initial          | Surname           |                 |                             |                 | 1101110  |                      |        |  |  |  |
|   |                  |                   |                 |                             |                 | Work F   | Phone                |        |  |  |  |
| Date of Birth (YYYY-MM-DD)  |                  | Marital Status: D | Single          | □ Marrie                    | ed □ Divorced   | □ Comm   | non Law              |        |  |  |  |
| CO-APPLICANT'S Full Name:   |                  |                   |                 |                             |                 | Home     | Phone                |        |  |  |  |
| First   | Initial          | Surname           |                 |                             |                 |          |                      |        |  |  |  |
|   |                  |                   |                 |                             |                 | Work F   | Phone                |        |  |  |  |
| Date of Birth (YYYY-MM-DD)  |                  | Marital Status: D | Single          | □ Marrie                    | ed □ Divorced   | □ Comm   | non Law              |        |  |  |  |
| OTHER RESIDENTS (INCLUDE CHI  | LDREN)           |                   |                 |                             | RELATION        | ISHIP    |                      | AGE    |  |  |  |
| 1.  |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
| 2.  |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
| 3.  |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
|   |                  | DESI              | DENTIAL         | HISTORY                     | ,               |          |                      |        |  |  |  |
| Present Address:  |                  | KEOI              | DENTIAL         | HIOTOK                      | How long there: |          | Rent                 | amount |  |  |  |
| Landlord  | phone #          |                   | Reason          | Reason leaving:             |                 |          |                      |        |  |  |  |
| Previous Address:   |                  |                   | <u> </u>        |                             | How long there: |          | Rent                 | amount |  |  |  |
| Landlord  | phone            | #                 | Reason          | leaving:                    | 1               | <u> </u> |                      |        |  |  |  |
| Previous Address:   |                  |                   | How long there: |                             |                 |          | Rent amount          |        |  |  |  |
| Landlord  | ndlord phone # R |                   |                 | Reason leaving:             |                 |          | I                    |        |  |  |  |
|   |                  | EMPL              | OYMENT          | HISTOR'                     | Y               |          |                      |        |  |  |  |
| APPLICANT'S Employment History  |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
| Status:   Full Time  Employer   | Part Time        | ☐ Student ☐ Re    | etired 🗆 l      | Jnemploy                    | red Dother      | Lengt    | h of                 |        |  |  |  |
| Епіріоуві   |                  |                   |                 |                             |                 |          | mployment            |        |  |  |  |
| Employers Address   |                  |                   |                 |                             |                 |          |                      |        |  |  |  |
| Supervisor/Caseworker   |                  |                   |                 | Phone #                     |                 |          | Income               |        |  |  |  |
| CO-APPLICANT'S Employment His   | -                |                   |                 | la a serie.                 | red 🗆 Other     |          |                      |        |  |  |  |
| Status:   Full Time   Part Time   Student   Retired   Employer  |                  |                   |                 | ☐ Current ☐ Previous Lengtl |                 |          | h of<br>pyment       |        |  |  |  |
| Employers Address   |                  |                   |                 |                             |                 | Limpio   | oyin <del>o</del> ni |        |  |  |  |
| Supervisor/Caseworker   |                  |                   |                 | Phone #                     |                 |          | Income               |        |  |  |  |

| (CONTINUED ON PAGE TWO)  |                    |                  |          |              |          |  |  |  |  |  |  |
|--|--------------------|------------------|----------|--------------|----------|--|--|--|--|--|--|
| REFERENCES   |                    |                  |          |              |          |  |  |  |  |  |  |
| Bank Reference   |                    | Address          |          |              |          |  |  |  |  |  |  |
| Chequing Accnt #   | Savings Accnt #    |                  |          |              |          |  |  |  |  |  |  |
| Credit Reference   | Credit Accnt #     |                  |          |              |          |  |  |  |  |  |  |
| Address  | Phone #            |                  |          |              |          |  |  |  |  |  |  |
| Personal Reference   | Address            |                  |          | Phone #      |          |  |  |  |  |  |  |
|  |                    | LOANS            |          |              |          |  |  |  |  |  |  |
| INSTITUTION  |                    | ADDRESS          |          | MONTHLY PMT. | BALANCE  |  |  |  |  |  |  |
| 1.   |                    |                  |          |              |          |  |  |  |  |  |  |
| 2.   |                    |                  |          |              |          |  |  |  |  |  |  |
| 3.   |                    |                  |          |              |          |  |  |  |  |  |  |
|  | AU                 | TOMOBILES        |          |              |          |  |  |  |  |  |  |
| MAKE / MODEL   | YEAR / COLOR       | LICENSE          | PLATE NU | JMBER        | PROVINCE |  |  |  |  |  |  |
| 1.   |                    |                  |          |              |          |  |  |  |  |  |  |
| 2.   |                    |                  |          |              |          |  |  |  |  |  |  |
|  | OTHER              | RINFORMATION     |          |              |          |  |  |  |  |  |  |
| In Case of Emergency Contact:  | Phone #            |                  |          |              |          |  |  |  |  |  |  |
| Address  |                    | Relationship     |          |              |          |  |  |  |  |  |  |
| NOTE: Upon execution of the lease and occupancy of the premises by the tenant, the deposit, if there is one, shall become the Security Deposit where applicable, otherwise shall become a rent deposit to be applied towards the last month's rent.  I hereby certify that the above information is true and complete and that I have not withheld any information relevant to this application. 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.  |                    |                  |          |              |          |  |  |  |  |  |  |
| Applicant Signature  | Date               | Co-Applicant Sig | gnature  | Dat          | te       |  |  |  |  |  |  |
| I/we herby 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. I/we also provide my/our consent to the Landlord or their Agent(s) to disclose information in my Rental Application and information arising from any tenancy between us to any third party for the purposes of providing a consumer/credit report or contributing information to a database of tenant information made available to landlords or their agents. |                    |                  |          |              |          |  |  |  |  |  |  |
| Applicant Signature  | Date               | Co-Applicant Sig | gnature  | <br>Dat      | te       |  |  |  |  |  |  |
|  | FOR OF             | FFICE USE ONLY   |          |              |          |  |  |  |  |  |  |
| REFERENCE VERIFICATION   |                    | PPLICATION       |          | DEPOSITS     |          |  |  |  |  |  |  |
| Present Address  | ☐ Approved [       | ☐ Not Approved   | Date     |              |          |  |  |  |  |  |  |
| Previous Address   | Date:              | Initials:        |          |              |          |  |  |  |  |  |  |
| Employment   |                    |                  |          |              |          |  |  |  |  |  |  |
| Co-Resident  | Final Building & A | Apt. #:          |          |              |          |  |  |  |  |  |  |
| Bank Chequing  | Data of Occurren   |                  |          |              |          |  |  |  |  |  |  |
| Saving Credit Loans  | Date of Occupan    | су               |          |              |          |  |  |  |  |  |  |