ZERIN PLACE SENIORS APARTMENTS

MAILING ADDRESS M.F. Arnsby Property Management 924 Oxford Street London ON N5Y 3J9 APARTMENT LOCATION 303 Commissioners Road West London ON (519) 472-3862

RENTAL APPLICATION

Application for bedroom apartment for	(date needed)
Rent subsidy required? Yes No	
Applicant 1	Applicant 2
Full Legal Name	
Present Address	
Phone	
Present Landlord's Name	Phone
How Long at This Address?	
Previous Address	
Previous Landlord's Name	
How Long at Previous Address?	
Employment Status?	
Last Employer Name	
Occupation	
How Long Employed?	
How Long Retired?	
Date of Birth	
Canadian Citizen ? (status)	
Social Insurance Number	
Annual Income (before taxes)	
Vehicle (year & make & plate#)	
Driver's Licence #	
Personal Reference # 1 (unrelated)	
Phone # of Reference #1	
Personal Reference #2 (unrelated)	
Phone # of Reference #2	
Any Special Needs/Accommodations?	
Home Care Support Used?	
Emergency Contact Name (family)	
Emergency Contact Phone #	
Do You Have Any Pets? (specify)	
I/We certify that the information provided in this appl	lication and the Statement of Household Income
and Assets is accurate and true. Any misrepresentation	
The applicant hereby gives permission to the Landlor	
landlords, employers and references, and to take any	
of this application. Note: This information is protecte	
www.zerindevelopment.ca	a under Zeriir's privacy policy. Check website at
www.zermacveropment.eu	
Dated Applicant Signature(s)	
Mail to Arnshy or smail to zerin-place-seniors@hotmail.co	om attn Raisa Romanchik Building Superintendent