



Suite 105, 7 Horizon Court  
Dartmouth, NS B3A-4R2  
P: 902-466-6500  
F: 902-466-6591  
[Office@HorizonCourt.ca](mailto:Office@HorizonCourt.ca)

## Leasing Application

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Birth: MM \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ SIN: \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Move Date: \_\_\_\_\_ Are you presently renting? **Yes No** How long? \_\_\_\_\_ Yearly or Monthly

If Yes, amount of rent per month \_\_\_\_\_ Anything Included? \_\_\_\_\_ ie heat/hot water

Landlord's name \_\_\_\_\_ Phone number: \_\_\_\_\_

Do you own a home? **Yes No** How long have you lived there? \_\_\_\_\_ Do you live with family? **Yes No**

Reason for moving: \_\_\_\_\_

Employer \_\_\_\_\_ Phone Number : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Your Supervisor \_\_\_\_\_ Phone: \_\_\_\_\_

Your Position \_\_\_\_\_ Years Employed There \_\_\_\_\_ Monthly Income \_\_\_\_\_

Are you retired? **Yes No** If yes, number of years retired \_\_\_\_\_ Monthly Income \_\_\_\_\_

Do you have any additional income information? **Yes No** If yes, Amount of additional income \_\_\_\_\_

Source of Income \_\_\_\_\_

### Co-Applicant:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Birth: MM \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ SIN: \_\_\_\_\_

Email: \_\_\_\_\_ Driver's License # \_\_\_\_\_

Are you presently renting? **Yes No** How long? \_\_\_\_\_ Yearly or Monthly \_\_\_\_\_

If Yes, amount of rent per month \_\_\_\_\_ Anything Included? \_\_\_\_\_ ie heat/hot water

Landlord's name \_\_\_\_\_ Phone number: \_\_\_\_\_

Do you own a home? **Yes No** How long have you lived there? \_\_\_\_\_ Do you live with family? **Yes No**

Reason for moving: \_\_\_\_\_

Employer \_\_\_\_\_ Phone Number : \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Your Supervisor \_\_\_\_\_ Phone: \_\_\_\_\_

Your Position \_\_\_\_\_ Years Employed There \_\_\_\_\_ Monthly Income \_\_\_\_\_

Are you retired? **Yes No** If yes, number of years retired \_\_\_\_\_ Monthly Income \_\_\_\_\_

Do you have any additional income information? **Yes No** If yes, Amount of additional income \_\_\_\_\_

Source of Income \_\_\_\_\_

Additional Occupants:

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Does anyone smoke? **Yes No** Do you have pets? **Yes No**

If Yes, type of pets? \_\_\_\_\_

Do you have vehicles? **Yes No** **Driver's License Photo Copy** \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Colour \_\_\_\_\_ Plate # \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Colour \_\_\_\_\_ Plate # \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**I hereby apply to lease a property from Can-Euro Investment Ltd. upon the conditions above set forth and agree that the rent is payable the first day of each month in advance and a Security deposit in the form of a money order is payable with this application. I warrant that all statements above set forth are true. The above information, to the best of my knowledge, is true and correct.**

**I agree to permit an investigation of my credit, tenant history, banking and employment for the purposes of renting an apartment with this owner/manager/agent acting on behalf of the owner/manager.**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date \_\_\_\_\_

Can-Euro offers to lease unit # \_\_\_\_\_ Rent \$ \_\_\_\_\_ Security Deposit \$ \_\_\_\_\_

Move-In-Date \_\_\_\_\_ Lease Date \_\_\_\_\_

Pro-rate \_\_\_\_\_ Days X \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_