

PROSPECTIVE TENANT FORM	
Number of Bedrooms:	
Monthly Budget:	
Desired Move-in Date:	
LEASING APPLICATION	
APPLICANT:	
Name in Full:	Birthdate (M/D/Y):
Present Address:	
Home #:	Work #:
	Email:
CO-APPLICANT:	
Name in Full:	Birthdate (M/D/Y):
Present Address:	
	Work #:
Cell #:	Email:
APPLICANT:	CO-APPLICANT:
Occupation:	
Current Employer:	
Phone Number:	
Employment Income:	
Other Income:	
accompanying applications or statements is true, of provided may be fully researched and relied upon affiliates or subsidiaries. The undersigned further explor or any of its affiliates or subsidiaries using and discloss to make any inquiries it deems necessary to fully researched. I/We consent to the collection, use and disclose credit agency or to anyone with whom I/we have a Queen's Marque Limited or any of its affiliates or substantial.	ts that all the information provided herein and on any complete and correct. It is understood that the information by the Residences at Queen's Marque Limited or any of its ressly consents to the Residences at Queen's Marque Limited sing the personal information contained or referenced herein arch this application including inquiries of any credit reporting osure at any time of the credit information about me/us to any financial relations. I expressly consent to the Residences at sidiaries sending me commercial electronic messages related acting (902) 422-4424. For the purposes of this consent the affiliates or subsidiaries includes its assigns.
Date: Applicant Signa	ture:
Date: Co-Applicant Signature	gnature: