

LEASING APPLICATION

APPLICANT:	Distributato	(M/D/V):
Name in Full: Present Address:		
Home #:		
Cell #:		
CO-APPLICANT:	Liliali.	
Name in Full:	Birthdate	(M/D/Y):
Present Address:		
Home #:		
Cell #:		
APPLICA		O-APPLICANT:
Occupation:		
Current Employer:		
Phone Number:		
Years Employed:		
Employment Income:		
Other Income:		
Previous Employer:		
Phone Number:		
APPLICANT:		
Present Landlord's Name:	Address:	Tel #:
How long have you lived there?	Reason for moving: _	
Previous Landlord's Name:	Address:	Tel #:
Next of Kin:		Tel #:
CO-APPLICANT:		
Present Landlord's Name:	Address:	Tel #:
How long have you lived there?		
Previous Landlord's Name:	Address:	Tel #:
Next of Kin:		Tel #:
The undersigned hereby represents and warrants statements is true, complete and correct. It is unde Residences at Queen's Marque Limited or any of its affiliates of herein to make any inquiries it deems necessary to proceed to the collection, use and disclosure at any whom I/we have financial relations. I expressly consending me commercial electronic messages related purposes of this consent the Residences at Queen's	rstood that the information provided may affiliates or subsidiaries. The undersigned for subsidiaries and disclosing the per fully research this application including inquivitime of the credit information about me, ent to the Residences at Queen's Marque Led to my tenancy. I/We may revoke consi	be fully researched and relied upon by the urther expressly consents to the Residences sonal information contained or referenced uiries of any credit reporting agency. I/We 'us to any credit agency or to anyone with imited or any of its affiliates or subsidiaries ent by contacting (902) 422-4424. For the
Date: Applicant S	Signature:	
Date: Co-Applica	nt Signature:	