



RENTAL APPLICATION (please complete form with care)

NAME:

ADDRESS:

_____ Tel.: () _____

Landlord: _____ Tel.: () _____

Date of birth ___/___/___ Soc. Ins. Number _____

EMPLOYER:

(name & address)

_____ Tel.: () _____

Since: ___/___/___ Salary: _____ Occupation: _____

BANK:

(name, address and account #)

(1) _____

_____ Tel.: () _____ - _____

Account #: _____ Loan (yes / no): _____

(2) _____

_____ Tel.: () _____

Account #: _____ Loan (yes / no): _____

By signing below, I recognise and accept that an inquiry on my credit worthiness can be done at all times by Cime, I authorise all financial institutions or other parties to give out information on my credit status or any other information required.

Signature: _____

Date: _____

Important : **CIME** is registered with the *Commission d'accès à l'information du Québec.*

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REQUEST BY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Tel.: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

**NOTE: FILL OUT THIS FORM AND SEND IT BY FAX FOR INVESTIGATION TO: (514) 767-0331**