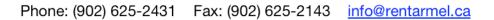
## Armel Apartments Ltd.

305 Philpott St., Unit 4 Port Hawkesbury, NS B9A 2B7





## **Rental Application**

Annicont Information		
Applicant Information		
Name:	Phone:	Mobile:
Address:		
Birthdate:	SIN:	Email:
Previous Landlord		Phone:
Current Employer		Phone:
Character Reference		Phone:
Co-Applicant Information		
Name:	Phone:	Mobile:
Address:		
Birthdate:	SIN:	Email:
Previous Landlord		Phone:
Current Employer		Phone:
Additional Occupants		
Name:	Birthdate:	
Name:	Birthdate:	
I hereby apply to lease a property from Armel Apartments 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 is payable with acceptance of 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.		
Rent/Month: \$	Deposit: \$	Unit: #
Signature:		Date:
Signature:		Date: