

Meech Holdings Ltd.

59 Queen Street, Unit #1

Truro, NS B2N 2B2

(902)893-3102

office@meechholdings.ca

RENTAL APPLICATION

Applicant

Smoker: **Y / N** Pets: **Y / N** Type: _____

Name _____ DOB: _____

Present Address _____ City/Province _____ Postal Code _____

Telephone: _____ e-mail _____

Location you are interested in: _____ **Rental Budget:** _____

Employer _____ Phone _____ Years Employed _____

Gross Income \$ _____ Other Income \$ _____ Source _____

Co-Applicant (If applicable)

Smoker: **Y / N** Pets: **Y / N** Type: _____

Name _____ DOB: _____

Present Address _____ City/Province _____ Postal Code _____

Telephone: _____ e-mail _____

Employer _____ Phone _____ Years Employed _____

Gross Income \$ _____ Other Income \$ _____ Source _____

Present Landlord

Name _____ Phone _____

Rental Location _____ Rent \$ _____

Duration: _____ Is landlord aware you intend to move? **Y / N**

Reason for Moving? _____

Previous Landlord

Name _____ Phone _____

Emergency Contact

Name _____ Phone _____

Relationship _____

PLEASE INCLUDE REFERENCES ON PAGE 2

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RENTAL APPLICATION

References (Please exclude family or friends)

Name: _____ Phone: _____

Relationship: _____

Name: _____ Phone: _____

Relationship: _____

Signature: _____ Date: _____

OFFICE USE ONLY

Location: _____

Unit#: _____

Occupancy Date: _____

Monthly rent amount: _____

Number Of Tenants: _____

Security deposit amount: _____

Approval: _____ Date: _____