| Name:   |  | Home phone:                       |                               | Work                                      |
|---|--|-----------------------------------|-------------------------------|---|
| Email:  |  |                                   |                               |   |
|   |  | Cell phone:                       |                               |   |
|   | Birth: S.I.N.: Driver's Lic.#  Address: Postal code:             |                                   |                               |   |
|   |  |                                   |                               | •   |
|   | on for moving:   |                                   |                               |   |
|   | Owner / manager: Phone: How long at this                         |                                   |                               |   |
|   |  |                                   | _                             |   |
|   | on for moving:   |                                   |                               |   |
| _   |  |                                   |                               |   |
| Name, relationship, and age of ev   | ery person to live with you:                                     |                                   |                               |   |
| Any pets? Describe:   | y pets? Describe:  |                                   |                               | Waterbed?                                 |
|   |  |                                   | •                             | yes no                                    |
| Present Occupation:   |  |                                   |                               |   |
| How long with this employer?  |  |                                   |                               |   |
| Previous Occupation:  | Employer:  |                                   |                               | Phone:                                    |
| How long with this employer?  | Supervisor:  |                                   |                               | Phone:                                    |
| Current gross employment incom  | ne per month (before deductions)                                 | :                                 |                               | -   |
| Misc. Income (eg. Alimony, chile  | d support, etc.):  |                                   |                               | -   |
| Credit reference:   |  |                                   |                               |   |
| Have you ever filed bankruptcy?   | : Have you ever been   | evicted ?:                        | if yes, reaso                 | on  |
| Vehicle(s):   |  |                                   |                               |   |
| Make:   | Model:   | Year:                             | License                       | :   |
| Make:   | Model:   | Year:                             | License                       | :   |
| Personal References:  |  |                                   |                               |   |
| Name:   | Address:   |                                   |                               | Phone:                                    |
| Name:   | Address:   |                                   |                               | Phone:                                    |
| <b>Emergency Contact:</b>   |  |                                   |                               |   |
| Name:   | Address:   |                                   |                               | Phone:                                    |
| I declare that the statements a application is submitted to ass Bureau. I further authorize a obtained through this consent | certain my credit rating, by pe<br>criminal record check if deer | erforming a credined necessary to | t check with<br>this applicat | the appropriate Creation. Any information |
| Date:, 20   | Signed:  |                                   |                               |   |