



M'IS KOWÁ AO SOCIETY

TENANT APPLICATION

NAME OF APPLICANT: _____

NAME OF SPOUSE: _____

PRESENT ADDRESS: _____

CITY: _____ POSTAL CODE: _____

HOME TELEPHONE: _____ MESSAGES: _____

**** Please note that if your living situation changes in any way while you are still interested in obtaining housing from the Society, it is your responsibility to inform us of any new information.**

PLEASE DOCUMENT ANY ADDITIONAL OCCUPANTS IN THE SPACE PROVIDED BELOW.

NAME	BIRTHDATE			SEX	RELATIONSHIP
	<i>D</i>	<i>M</i>	<i>Y</i>		
					Applicant

INCOME DATA

EMPLOYED, EI OR PENSION (Please complete the following):

NAME OF EMPLOYER:	POSITION:	HOW LONG?
ADDRESS:	PHONE NUMBER:	SALARY:

IDENTIFICATION INFORMATION

SOCIAL INSURANCE NUMBER:	DRIVER'S LICENCE NUMBER:
CARE CARD NUMBER:	

NAME OF PRESENT LANDLORD *(if applicable)*: _____

PHONE NUMBER: _____ ADDRESS: _____

PERSONAL DATA:

PLEASE LIST THE NAMES OF THREE RELATIVES OR CLOSE FRIENDS WE CAN CONTACT IN CASE OF EMERGENCY:

- 1) _____ TELEPHONE: _____

- 2) _____ TELEPHONE: _____

- 3) _____ TELEPHONE: _____

PLEASE BE ADVISED THAT THE SOCIETY DOES NOT ALLOW PETS

I/we certify that the information provided on this form is true.

I/we understand that this Application does not constitute an agreement on the part of the Society to provide me/us with rental accommodation.

DATE: _____

SIGNATURE OF APPLICANT: *x* _____

x _____

M'AKOLA HOUSING SOCIETY: *x* _____