



Employment History

Present Employer _____

Occupation _____

How Long _____

Tel # _____

Annual Income \$ _____

If Less Than 2 Years

Previous Employer _____

Occupation _____

How Long _____

Tel # _____

If Less Than 2 Years at Current Address

Previous Address _____

City _____ Postal Code _____

Previous Landlord _____

Previous Landlord Phone # _____

The undersigned agrees that usual tenant and credit inquiries may be made at anytime in connection with the application hereby applied for and consents to the disclosure of such information to any person or to any credit reporting agency with whom the undersigned has or may have financial relations. Upon acceptance of this Application and the signing of the lease the Landlord shall retain the deposit as Liquidation Damages if the Tenant fails to occupy the tenancy and abide by the terms of the lease.

- No pets without the written permission of the Landlord
- No satellite dishes allowed

**If paying by certified cheque or money order make payment to Turret Management Inc
Debit Payments can be made at the Leasing Office**

We certify the information provided is complete and accurate.

Signature _____

Date _____ / _____ / _____
DD MM YYYY

Signature _____

Date _____ / _____ / _____
DD MM YYYY