



Rent To Own Approval Form

Appleridgehomes
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Full Name _____ E-Mail address: _____ D.O.B: _____
Home Phone (____) _____ Work Phone (____) _____ Cell Phone (____) _____
Social Insurance Number ____ - ____ - ____ Driver's License # _____ Province: _____
Present Address _____
City _____ Province: _____ Postal Code: _____
How Long? _____ If renting, Apartment name/location _____ Current Payment: \$ _____
Landlord/mgr's name _____ Phone: (____) _____
Employer: _____ Position: _____ How Long? _____ Annual Income: _____
Address _____ Phone: (____) _____
Name and relationship of everyone living with you: _____
Any pets? Describe: _____

List Total Assets And Value (Real Estate, RRSP, Stocks etc):	
List Total Liabilities(Credit Card, Loans, Mortgages etc):	What is the Total Monthly Payment:

Do You Have a Price Range In Mind? _____
When would you like to move in? _____
How much of a deposit can you raise? _____
How much can you afford to pay monthly on your lease? _____
Is your credit, good, fair, or ugly? _____
How did you hear about this Rent to Own Program? _____

I declare that the application is complete, true and correct and I herewith give my permission for anyone contacted (including TransUnion or Equifax) to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of this application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on the application. By providing the home phone numbers and email addresses above, I/we hereby authorize the Vendor to contact me/us at my/our home phone numbers or email addresses.

Applicant's Name (Print): _____

Signature & Date: _____

EACH PERSON OVER 18 MUST COMPLETE A SEPARATE APPROVAL FORM

*****Please Fully Complete This Application Form*****