



#202, 150 Edwards Way NW
 Airdrie, AB T4B 4B9
 Phone: 403-948-0337

Email: rentals@astoriamanagement.ca
 Email: airdrierentals@astoriamanagement.ca

RENTAL APPLICATION FORM

**One application must be filled out by each Tenant in full,
 or applications will not be considered.**

Rental Address Suite # _____, _____ City _____

Term _____ Monthly Rent _____ Proposed Move-In Date _____

Parking (if applicable): Underground Exterior Pets: _____ (approval attached)

NAME IN FULL _____ DATE OF BIRTH _____
year/month/day

Contact Phone # _____ or _____ Email: _____

Other Occupant(s): _____ (name) Relationship: _____
 (under the age of 18) _____ (name) Relationship: _____
 _____ (name) Relationship: _____

CURRENT Address _____ / _____ / _____ Length of Tenancy _____
street address city postal code
 Current Landlord Name/Company _____ Rent \$ _____
 Phone # _____

Previous Address _____ / _____ / _____ Length of Tenancy _____
street address city postal code
 Previous Landlord Name/Company _____ Rent \$ _____
 Phone # _____

CURRENT Employer: _____ Address _____ Phone # _____

Supervisor _____ Length of Employment _____ Position _____ Salary \$ _____

Previous Employer: _____ Address _____ Phone # _____

Supervisor _____ Length of Employment _____ Position _____ Salary \$ _____

REFERENCES:
 1) _____ / _____ / _____ / _____
Name Address Phone # Relation
 2) _____ / _____ / _____ / _____
Name Address Phone # Relation

DRIVERS LIC # _____ Province _____ SIN # _____

In Case of Emergency: Name _____ Relationship _____
 Phone # _____ Address _____

Comments: _____

I/We hereby certify that all statements made in this application are true and I/we hereby authorize the Landlord to conduct a personal investigation/credit check and to contact any person identified in this Rental Application. I understand and acknowledge that if the application information provided is incorrect Astoria Asset Management Ltd. may at its option elect to terminate my tenancy agreement upon thirty days written notice. **I/We hereby acknowledge that there are no pets allowed on these premises without written authorization from the Landlord.** In order for Astoria to comply with federal and/or provincial privacy legislation, I/we understand that all personal information collected from me/us may be collected, used and disclosed by Astoria for the purpose of my/our application assessment, for the purpose of debt collection, to uphold and maintain the rules and regulations of the property, to evaluate my/our tenancy, to comply with applicable law and in the ordinary course of Astoria's business, including, but not limited to, any refinancing or potential sale of the property.

Prospective Tenant Signature _____

REQUIRED

Dated this _____ day of _____, _____

OFFICE USE ONLY	INITIALS
APPROVED	
DENIED	
DATE	