

RENTAL APPLICATION FORM

info@homepageproperty.com 204-422-5247

APPLICATION REQUIREMENTS

To qualify to rent from Homepage Property Management, the monthly rent on the unit for which you apply should not exceed **35%** of your gross monthly income, and you must have a good rental history if you are currently a renter.

*An application is only considered complete once all supporting documentation requested has been received by our office. Please note that we may request or require additional information to process your application depending on individual circumstances.

□ Proof of income or a o employment o two most rece o recent bank s	on for each adult (18+) plan bility to pay the rent for the etter or letter of offer, or ent pay stubs, or	e unit being appl				* Required J	field	
How did you hear about us? (Check all that apply.) □ Re	bout us? (Check all				☐ Newspaper*: ☐ Radio*: ☐ Other*: *Please specify			
Rental location(s)*:								
Date rental needed*:		How many bedrooms needed?*						
APPLICANT'S PERSONAL IN	FORMATION:							
First name*	Middle name	me Last name*			Date of birth* yyyy-			
Home number:		Work nu	ımber:					
Cell number*:		Email address*:						
OTHER PROPOSED OCCUPA	NITS (INIC CITH DDFN). 41	Landalka 40 a linina			1		h - 1	
First Name	Last Name			Age	fill out an application and sign the lease. Relationship			
Occupant:	Last Name			Age	Neiati	ionsinp		
·								
Occupant:								
Occupant:								
Occupant:								
Occupant:								
Occupant: Occupant: Occupant:								
Occupant: Occupant: Occupant: PRESENT ADDRESS:	Yes \(\square\) No		Are	you ren	ting?	□ Yes □ I	No	
Occupant: Occupant: Occupant: PRESENT ADDRESS: Address*: Do you own this residence	Yes No	le the compan					No	
Occupant: Occupant: Occupant: PRESENT ADDRESS: Address*: Do you own this residence	tly renting, please provid	le the compan					No	

Reason for leaving:



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EMPLOYMEN	T INFORMATION)N: * for ei	mployment history	y of less	than 1	year, pr	evious his	story will	be required	
Employment	status*:				Occupa					
Em	ployer*:			Ler	Length of employmen					
Supe	ervisor*:			S	Supervisor's num					
Gross month	ly income*:									
Other source	e of income*:				Moi	nthly am	nount*:			
ADDITIONAL	INFORMATION	V :								
Have you ever been served an Order of Possession or an Eviction			n Notic	e? *	☐ Yes ☐ No					
Have you ever been refused service or disconnected by a public utility (Manitoba Hydro, Centra Gas, MTS) due to non-payment of your according to the contract of the contract						nt?*	□ Yes □ No			
Do you currer	ntly smoke? *							☐ Yes	□No	
PET INFORMA	ATION: Only 2	pets allowe	d per unit. Maximu	m weigh	t of 301	bs ea. Se	parate pet	t applicati	ion required.	
Pet 1: Type				Pet 2: Type:						
Breed:				Bree	Breed:					
Weight:				Weig	Weight:					
PERSONAL RE	FERENCES: ie.	Previous lanc	dlord, employers. No f a	amily mer	nbers oi	r friends.				
	Name			R	Relationship		Numbe	Number		
Reference #1	*.									
Reference #2	*.									
eviction in future	e. By signing, you or their agent. A	agree and a	o provide accurate inf authorize your refere n you provide will be	nces and	contact	s noted a	bove to rel	ease any i	nformation to	
Applicant's sign	gnature			Date						
Completed app	olications and	supporting	paperwork can b	e sent v	via ema	ail to <mark>inf</mark>	o@homer	oageprop	erty.com.	
For office use	only:							T		
Yardi: 🗆										
I ∆nnlication a	iccepted: 🗌 Y	es 🗆 No	Address of Renta	al:						