



12906 - 146 STREET  
 Edmonton, AB T5L 2H7  
 phone: (780) 454-4087  
 email: rent@fett.ca  
 www.fettinvestments.com

**APPLICATION FOR RENTAL ACCOMMODATION**

**- PERSONAL INFORMATION -**

INFORMATION REQUIRED	APPLICANT 1	APPLICANT 2
FULL NAME		
PHONE		
EMAIL ADDRESS		
DATE OF BIRTH		
CURRENT ADDRESS		
TIME AT CURRENT ADDRESS		
PRESENT EMPLOYER		
OCCUPATION		
TIME AT CURRENT EMPLOYER		
EMPLOYER ADDRESS		
EMPLOYER PHONE		
MONTHLY INCOME		
BANK NAME		
BRANCH		
CURRENT LANDLORD NAME		
CURRENT LANDLORD PHONE		
PREVIOUS LANDLORD NAME		
PREVIOUS LANDLORD PHONE		
<b>- FOR OFFICE USE ONLY -</b>		
PHOTO ID VERIFIED	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

NUMBER OF PEOPLE TO OCCUPY PREMISES _____	ADULTS _____
	CHILDREN _____ AGES _____
DATE ACCOMMODATION REQUIRED (MM/DD/YYYY)	
TYPE OF ACCOMMODATION REQUIRED BACHELOR <input type="checkbox"/> 1BEDROOM <input type="checkbox"/> 2BEDROOM <input type="checkbox"/> 3BEDROOM <input type="checkbox"/>	IS FURNITURE INSURED AGAINST LOSS BY FIRE, THEFT ETC.? YES <input type="checkbox"/> NO <input type="checkbox"/>
MAKE & YEAR OF VEHICLE _____	LICENSE PLATE _____

**- EMERGENCY CONTACT -**

NAME		PHONE	
ADDRESS		CELL	

I/We hereby certify that all statements made in this application are true. I/We hereby authorize the Landlord to conduct a credit check.
DATED THIS _____ DAY OF _____ 20 _____
APPLICANT 1 (SIGNATURE) _____
APPLICANT 2 (SIGNATURE) _____

**THE LANDLORD ACKNOWLEDGES THE CONFIDENTIALITY OF THIS DOCUMENT**