

**Galaxy
Properties
Limited**

www.sohohalifax.com
info@sohohalifax.com



**(P) 902-492-2347
(F) 902-492-0129**

**1212
Hollis Street
Halifax, NS**

Suite #	<input type="text"/>	Rent \$	<input type="text"/>	per month (includes heat and hot water)	Parking \$	<input type="text"/>	Number of Spots	<input type="text"/>
Number To Occupy Suite	<input type="text"/>	Any additional occupants must be approved by the Landlord.				Date Required	<input type="text"/>	<input type="text"/>

Applicant

First Name	<input type="text"/>	Last Name	<input type="text"/>
Date of Birth	<input type="text"/>	SIN* (optional)	<input type="text"/>
E-mail	<input type="text"/>	Telephone Home	<input type="text"/>
		Work	<input type="text"/>
Current Address	<input type="text"/>		
	City/Province		

Present Landlord

Landlord's Name	<input type="text"/>	Contact Person	<input type="text"/>
Telephone	<input type="text"/>	E-mail	<input type="text"/>
Current Rent	<input type="text"/>	How long?	<input type="text"/>

Previous Landlord

Landlord's Name	<input type="text"/>	Contact Person	<input type="text"/>
Telephone	<input type="text"/>	E-mail	<input type="text"/>
Monthly Rent	<input type="text"/>	How long?	<input type="text"/>

Employment

Current Employer	<input type="text"/>	Occupation	<input type="text"/>
Manager or Contact	<input type="text"/>	Telephone	<input type="text"/>
Annual Income	<input type="text"/>	Years Employed	<input type="text"/>

Personal References & Emergency Contact

Name	<input type="text"/>	Relationship	<input type="text"/>
Telephone	<input type="text"/>	Email	<input type="text"/>
Name	<input type="text"/>	Relationship	<input type="text"/>
Telephone	<input type="text"/>	Email	<input type="text"/>

Vehicle Information (subject to availability)

Pets (subject to Landlord's approval)

Make	<input type="text"/>	License Plate	<input type="text"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Type	<input type="text"/>
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I acknowledge and agree that the tenancy shall be based on an annual lease and that rent shall be payable by pre-authorized debit. Any change in the tenancy must be approved by the Landlord in writing. I hereby consent to the Landlord conducting a credit review and obtaining information about me from outside parties, including a credit report. I also acknowledge receipt a copy of the *Residential Tenancies Act* of the Province of Nova Scotia. I certify that that all statements on this Application are accurate and true and I authorize verification of the information provided. I hereby offer to lease the above-noted apartment at the noted rate of rent.

Amount of Deposit	\$	<input type="text"/>	Date	<input type="text"/>	
Cheque	<input type="checkbox"/>	EFT	<input type="checkbox"/>	Cash	<input type="checkbox"/>
Applicant's Signature				<input type="text"/>	