RENTAL APPLICATION

POLAR DEVELOPMENTS LTD. P.O. BOX 2542 YELLOWKNIFE, NT X1A 2P8 PHONE: 867 873-5701 FAX: 867 873-3638			TYPE OF SUITE REQUIRED (1 Bed 1 Bed+den 2 Bed/large bath 2 Bed/1 ½ bath 2 Bed/2 bath+den			in order of preference)
			Pentho	use 1050	sq.ft	D & 2 BED+DEN 1249 sq.ft 1674 sq.ft
Date Required	Stora	age Unit Requeste	d Yes	No	Parkir	ng Yes No
EAST VIEW	_ WESTVIEW_	FLOOR	(Pref	erence re	equest not g	uaranteed)
	The	e following infor	mation is	strictly	confidentia	ıl
Name of Tenant				Age		Marital Status
Name of Tenant				Age		Marital Status
Present Address Telephone						
Name of Spouse/	Mate			Age	M/F	Relationship
Dependants				Age	M/F	Relationship
Total Occupants						
Tenant Particula	_					
Present Landlord'					Phone	
Address						How Long
Previous Landlord	d's Name					Phone
Address						How Long
Employment Occupation		Name of Present	t Employe	er		Phone
Address Of Emplo	oyer					How Long
Occupation Name of Previous Employer						Phone
Address						How Long
Annual Gross Inc	ome				(Combineds	\$)

REFERENCES

Bank Name		Branch	n City	Account #	Туре			
PERSONAL REFERE	NCES	Address	Phone		Relationship			
Name		Address	Phone		Relationship			
VEHICLES Drivers License No.		Auto's_		_				
		Owned	Leased	_ None				
Make	Model	Colour		License Num	ber			
Make Model		Colour		License Num	ber			
Other Vehicles (i.e. boa	at, camper,	skidoo, motorcyc	cle, etc.)					
Additional Occupant' Name of Personal Refe	erence	Address		Phone	Relationship			
		Addres	<u></u>	Phone	Relationship			
Present Address for Ad	dditional Oc	cupant						
Current Landlord's Nar		Phone						
Previous Landlord's Name			Address		Phone			
Name Of Present Employer			Supervisor's Name					
Address Of Employer			Phone					
Length Of Employment	t	Annual	Income	Bank				
CONDITIONS No pets, unless au In connection with my atto be conducted a pers	application	for tenancy, I here	•					
Witness		Applica	ant	 Date	 ;			
Witness		Applica	ant	Date				
Witness		Landlo	Landlord or Agent		 Date			