



**QUEBEC  
LANDLORDS  
ASSOCIATION**

www.apq.org

# APQ TENANT RATING SERVICE

**TO: APQ** Tel: 514 382-9670 - [www.apq.org](http://www.apq.org)  
Toll free: 1-888-382-9670

Checks to be done :  90 rating  360 rating  Other (specify) : \_\_\_\_\_

PLEASE WRITE IN BLOCK LETTERS

**MEMBER I.D.** MEMBER No: \_\_\_\_\_ First name: \_\_\_\_\_ Family name: \_\_\_\_\_  
Cell.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**DWELLING I.D.** Dwelling address: \_\_\_\_\_ Apt.: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal code: \_\_\_\_\_

**PROSPECTIVE TENANT**

Tenant I.D. Number (APQ use only) \_\_\_\_\_ First name: \_\_\_\_\_  
Family name: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ DAY MONTH YEAR Mail \_\_\_\_\_@\_\_\_\_\_  
Tenant's address: \_\_\_\_\_ Apt.: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal code: \_\_\_\_\_

How long have you resided at this address? \_\_\_\_\_ Rent paid: \_\_\_\_\_

Name of current landlord: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

End date of lease: \_\_\_\_\_ Is the lease in your name ?  YES  NO

Previous landlord: \_\_\_\_\_  
Previous address: \_\_\_\_\_  
Tel.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Lease from \_\_\_\_\_ to \_\_\_\_\_ Is the lease in your name?  YES  NO

**EMPLOYMENT**

Current employer: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal code: \_\_\_\_\_

Occupation: \_\_\_\_\_ For How long? \_\_\_\_\_ Net monthly salary: \_\_\_\_\_

Other income (explain): \_\_\_\_\_

**EMERGENCY CONTACT**

Name: \_\_\_\_\_ Tel.: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal code: \_\_\_\_\_

**AUTHORIZATION**

I declare and certify that the information provided herein is true. I authorize the landlord to obtain through any credit agency, personal information regarding me, most notably my credit history, financial situation and payment history, and this from any records, or persons having financial or contractual relationships with me, and from all persons whose name I have supplied as references. I authorize the landlord to communicate any such information regarding me to the Quebec Landlords Association (APQ), 1-888-382-9670, www.apq.org, and to any mandatee designated by the latter in the course of a credit investigation.

Prospective tenant's signature: **X** \_\_\_\_\_ , this \_\_\_\_ DAY / \_\_\_\_ MONTH / \_\_\_\_ YEAR  
Signature of witness: \_\_\_\_\_

# RENTAL APPLICATION

ADDRESS OF UNIT: \_\_\_\_\_

YOUR NAME: \_\_\_\_\_

TEL: (home/cell) \_\_\_\_\_ (work) \_\_\_\_\_

Date of birth: \_\_\_\_\_ Driver's License \_\_\_\_\_

Social Insurance Number: \_\_\_\_\_

Name and relationship of every person to live with you, even if only temporary (including ages of minors) \_\_\_\_\_

Any pets: \_\_\_\_\_ Description: \_\_\_\_\_

Will anyone be smoking in the unit? \_\_\_\_\_

## HAVE YOU:

Ever filed for bankruptcy? \_\_\_\_\_

Been evicted from a unit? \_\_\_\_\_

Been convicted of a crime? \_\_\_\_\_

If you answered yes to any of these questions, please explain on the back.

## VEHICLE

Mark/Model/License \_\_\_\_\_