Compton Court Apartments
11310-109 Avenue
Edmonton, Alberta T5H 1E2
Phone: (780) 413-6020 Fax: (780) 413-6021

Suite Viewed:_____Monthly Rent:_____6 month lease.
Adult Complex, No Pets Parking: $15.00 / month Picture I.D. Required
Damage Deposit: $_____.00 payable by MONEY ORDER or CERTIFIED CHEQUE only.
**Deposit is non-refundable after processing.*

Name:_____/_____ Birthdate:_____/_____/____
Last First M D Y
SIN#:_____ **Credit checks are done for all applicants.*

Phone Number (home):_____EMAIL ADDRESS_____

Residence History:

Current Address:_____City:_____Province:____

Postal code_____
How Long:_____ Rent:_____
Landlord's Name:_____ Phone:_____

Previous Address:_____City:_____Province:____
Postal code_____
How Long:_____ Rent:_____
Landlord's Name:_____ Phone:_____

Employment History

Present Employer:_____Phone:_____
Postion:_____How Long:_____
Monthly Income:_____
**Previous employer information is required if current employment is less than 1 year.*

Previous Employer:_____Phone:_____
Position:_____How Long:_____
Monthly Income:_____

Any rent paid after the 1st of the month is subject to a $50.00 late payment charge. All NSF cheques are also subject to a $25.00 processing charge plus the $50.00 late fee.

Please provide three (3) personal references, (no family members).
Name:_____Phone:_____
Name:_____Phone:_____
Name:_____Phone:_____

I hereby give consent to Compton Court making any credit investigations, employment information, present or past tenancy representative and /or reference checks necessary.
Date:_____ Signature:_____