

## HOWARD SZALAVETZ PROPERTIES 433 Chabanel O. Suite 300, Montréal, H2N2J4

Phone: 514-489-9994

## OFFER TO LEASE

## PARTICULARS OF APARTMENT: ADDRESS: \_\_\_\_\_\_APT.#\_\_\_CITY:

ADDRESS:	A	PT.#CITY:		
RENT: \$ LENGTH OF LEASE:	: FROM	to	·	
THE ITEMS CHECKED OFF ARE INCLU	JDED IN THE RENT:			
INSIDE PARKING HEATING	G WATER TAX _	STOVE	_ GRABAGE TAX	
OUTSIDE PARKING HYDRO _	HOT WATER_	CABLE	FRIDGE	
ΓΕΝΑΝΤ INFORMATION:				
NAME:	SURNAME:_			
DOB: D/M/Y EMAIL:				
SOCIAL INS.#//	TEL#	CELL		
DRIVERS PERMIT				
BANK/BRANCH	ACC'T #			
PRESENT ADDRESS:				
ADDRESS:	APT	CITY		
POSTAL CODE: SINCE	E WHEN	PRESENT RI	ENT IS \$	
LEASE IN YOUR NAME: Y//N				
NAME OF OWNER:		TEL#:		
EMPLOYER: NAME				
ADDRESS				
OCCUPATION	SINCE WHEN		_	
SALARY \$				
PERSONAL REFERENCES:				
NAME:		ADDRESS		
ΓEL#:	_			
NAME:		ADDRESS		
TEL#:	_			
THE LEASE WILL BE SIGNED JOINTLY W	VITH: SPOUSE FRIE	END GUARANTOR	R	
NAME:	SUR	NAME:		
DOB:D/M/Y				
DRIVERS PERMIT #:	SIN#:			
EMPLOYER	BANK	BRANCH	ACC'T	
SPECIAL CONDITIONS: NUMBER OF PEOPLE TO OCCUPY THE A				
I/WE THE UNDERSIGNED AGREE AND ACCEING BUILDING REGULATIONS PROVIDING THAT PRESENT DATE. I/WE FURTHER AGREE TO DIT OF BE REIMBURSED IF THIS OFFER TO IT PROPERTIES TO OBTAIN OR EXCHANGE INFORMATION WRITTEN ON THIS DOCUMENT OF APARTMENT. IF ANY INFORMATION OF THE LANDLORD'S DISTANCE.	THIS OFFER OF LEASE IS DEPOSIT A SUM OF \$	ACCEPTED BY THE LESSAS PAYMENT TO HE LANDLORD. WE AU CREDIT INFORMATION. CAN ONLY BE USED TO	OR WITHIN FIVE (5) DAYS OF THE WARDS THE FIRST MONTHS REN' JTHORIZE HOWARD SZALAVET IT IS UNDERSTOOD THAT THE VERIFY MY SOLVENCY TO REN'	
ΓENANT NAME	TENAN	TENANT SIGNATURE		

TENANT NAME \_\_\_\_\_\_ TENANT SIGNATURE \_\_\_\_\_