DONWOOD SOUTH Tenant Application Form

1245 Henderson Hwy. Winnipeg, MB R2G 1M1

Applicant First Name	Last Name		Date of Birth (dd/mm/year)
Co-Applicant First Name	Last Name		Date of Birth (dd/mm/year)
Current Address		Postal Code	Phone Number
How long have you lived at your	current address?		Are you renting?
If you are renting at this address	, how much do you p	pay for rent?	
(If applicable) Landlord's Name,	Address and Phone N	Number:	·
Type of Suite Required: 1 E	Bedroom	2 Bedroom	
NOTE: 2 BE	DROOM SUITES ARE	FOR DOUBLE OCC	UPANCY ONLY
Do you require parking space?	Yes	No _	
Do you receive health or suppor	t service? Yes	No _	
DECLERATION: I/We understand that submission of understand that Donwood South reinvestigation prior to offering me/u complete. I/We understand that an information is collected by Donwood Personal Information Protection and	eserves the right to requise a lease. I/We certify my false information gived od South and will be use	uest additional info the information giv ven may result in ref ed to establish eligil	rmation and conduct a personal en in this application is true and usal of this application. Personal
Signature of Applicant:		Da	te:
Signature of Co-Applicant:		Da	ite:
PLEASE BE ADVISED: It is the ap address, phone number and and applications are retained for you will need to apply again.	y other information _I 2 <u>years</u> . <i>If you have</i>	provided in the ini	tial application.
NC	PET & NO SMOK	ING POLICIES E	NFORCED

<u>Please send all completed applications to Donwood Manor Personal Care Home</u>
<u>171 Donwood Drive, Winnipeg, MB R2G 0V9</u>