



TENANTCHECK CREDIT SERVICES

Helping Landlords since 1998

Ph: 604.460.0838 ♦ Toll Free: 1.877.777.0838 ♦ Email: info@tenantcheck.ca

Applicant Consent Form

LANDLORD/LENDER NAME:		RENTAL PROPERTY ADDRESS:
Please select the permissible purpose below (select one)		
<input type="checkbox"/> Tenancy Screening (landlord)	<input type="checkbox"/> Tenancy Screening (property manager)	<input type="checkbox"/> Private Financing

CREDIT CHECK CONSENT:

I hereby consent to **TenantCheck Credit Services** obtaining a credit information report on me from **TransUnion**, in connection with my/our application for tenancy, mortgage or other permissible purpose.

APPLICANT INFORMATION (must be handwritten):

FULL LEGAL NAME (please print clearly):	
BIRTH DATE:	SOCIAL INSURANCE #:
Month (print) / / Day Year	
CURRENT ADDRESS:	CITY:
POSTAL CODE:	DAYTIME PHONE NUMBER:
	() _____ - _____
PREVIOUS ADDRESS:	CITY:
NAME OF CURRENT EMPLOYER:	POSITION:
NAME OF SPOUSE: (married or common law)	
DATED:	SIGNATURE OF APPLICANT:

PLEASE NOTE THAT EACH APPLICANT MUST SIGN A SEPARATE FORM FOR JOINT CREDIT SEARCHES