



# Prince Albert Housing Authority

CARMENT COURT 230 8th STREET EAST PRINCE ALBERT SASKATCHEWAN S6V 7A2

PH. 953-7420 FAX 764-0970

## REFERENCE AND TENANCY HISTORY

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

RENTAL ADDRESS: \_\_\_\_\_

### TO BE COMPLETED BY THE LANDLORD

Lease start date \_\_\_\_\_ to Lease end date \_\_\_\_\_

Spouse/Joint tenant(s) name: \_\_\_\_\_

Number of bedrooms/Occupants: Bedrooms \_\_\_\_\_ Adults \_\_\_\_\_ Children \_\_\_\_\_

Rent: \$ \_\_\_\_\_ Damage Deposit \$ \_\_\_\_\_ Deposit Returned \$ \_\_\_\_\_

Utilities included: \_\_\_\_\_ Energy \_\_\_\_\_ Power \_\_\_\_\_ Water Outstanding arrears \$ \_\_\_\_\_

Notice to Vacate: \_\_\_\_\_ Proper Notice \_\_\_\_\_ Short Notice \_\_\_\_\_ Eviction

Rent History: \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Poor (why) \_\_\_\_\_

Housekeeping: \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Poor

Yard Care: \_\_\_\_\_ Excellent \_\_\_\_\_ Good \_\_\_\_\_ Poor

Bed Bugs: \_\_\_\_\_ yes \_\_\_\_\_ no

Would you consider re-renting to this client? \_\_\_\_\_ Yes \_\_\_\_\_ No

Lease Violation Notice: \_\_\_\_\_ Yes \_\_\_\_\_ No What type? \_\_\_\_\_

Comments: \_\_\_\_\_

Certify that the above is true and correct.

\_\_\_\_\_  
Signature of Landlord

\_\_\_\_\_  
Printed Name or Company Stamp

\_\_\_\_\_  
Phone number