

Durham Region Non-Profit Housing Corporation 28A Albert Street

Oshawa, Ontario L1H 8S5

Phone: 905-436-6610 Fax: 905-436-5361

GUARANTOR APPLICATION

This	guarantor applicat		s application.							
INSTR	UCTIONS:									
1.	Please print clearly and in ink.									
2.	Current written income verification (from Employer - 3 recent pay stubs) MUST accompany application.									
3.	Complete ALL SECTIONS and forward to the Corporation at the above address.									
4.	If you have any questions, please contact the Corporation at (905) 436-6610.									
DECLA	RATION									
1.	I declare the information belief.	on on this applica	ation to be correct and complete	to the best of	my knowledge and					
2.	I authorize DRNPHC to make any inquiries that it deems necessary to verify the information given in this form. I agree to provide the supporting material that DRNPHC requires.									
Dated a	at	this	day of	<u>,</u> 20 <u> </u>						
Signatu	ire of guarantor	_	Signature of witness							
Signatu	re of co-guarantor	_	Signature of witness							
Printed	d name and address	of witness								
FOR	OFFICE USE ONLY									
Credit Check		Rent Calculation	Rent Calculation							
Notes	S:									

1. GUARANTOR INFORMATION

Last Name		First Name & Initials		Date of Birth (Day/Month/Ye		ear)	Sex M/F		
Street Number	Street N	ame		Apt	Apt # Social Insurance Nu		umber		
Town / City		Postal Code	Home	ne Phone #					
2. PRESENT EMP	LOYMEN	Γ OF GUARANTOR							
Present Employers Name					Telephone Number				
Address where employed					Municipality				
Occupation		Name of Department		Te	Telephone & Extension No.		Are you allowed to take Personal calls at work? Yes / No		
3. CO-GUARANTO	OR INFOR	MATION (If Applicable)						
Last Name		First Name & Initials		Date of Birth (Day/Month/Year		ear)	Sex M/F		
Street Number	Street N	ame		Apt # Social Insurance N		ance Nu	umber		
Town / City		Postal Code	Home	e Ph	one #				
4. PRESENT EMP	LOYMEN	Γ OF CO-GUARANTOR							
Present Employer Name					Telephone i	Number			

Address where employed			Municipality		
Occupation	Name of Department	Те	lephone & Extension No.	Are you allowed to take Personal calls at work? Yes/No	

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