

LANDLORD REFERENCE FORM

Instructions: Fill in Section A. Sign at Section C. Forward to your previous landlord and have him/her complete Section B. Return completed form to Battleford / North Battleford Housing Authority at: #102 1191 99th Street; or fax to: 306-446-1277.

Section A

Name of Tenant(s) #1 _____ #2 _____

Former Address: _____

City: _____

Postal Code: _____

Section B (to be completed by former Landlord)

Length of Tenancy: From _____ To _____

Number of Occupants: Adults _____ Children _____

COMPLAINTS: () Yes () No
If YES, How many? _____ What type? _____

LEASE VIOLATION NOTICES: () Yes () No If YES, what type? _____

NOTICE TO VACATE: () Proper Notice Given () Improper Notice Given () Eviction
() Other: _____

DAMAGE DEPOSIT: () Returned () Not returned Details: _____

Outstanding Balance upon Vacating: () Yes () No Details: _____

Other Comments: _____

I certify that the above is true and correct.

Signature of Landlord

Printed name of Landlord

Address

City/Province

Postal Code

Phone Number (daytime) / (evening)

Date

Section C

I authorize the release of the above landlord reference information to Battleford / North Battleford Housing Authority.

Signature of Tenant

Signature of Tenant

All information listed is subject to verification by the housing authority.