

TO BE COMPLETED BY LANDLORD

RENT REPORT

Renter's Information:

Renter(s) Name(s): _____

Residential Address: _____

Complete Street Address Including Suite Number (if applicable)

City/Town/Municipality

Postal Code

Monthly Rent: \$ _____

Additional Fees (*if applicable*) \$ _____

Monthly Rent Incentive (*if applicable*) \$ _____

Total monthly payment: \$ _____

Utilities Included in monthly rent: Heat Power Water NONE

Is there rent owing? YES NO

If yes: amount and for what period of time? _____

Landlord Information:

Name/Property Manager _____

Address: _____

Phone Number: _____ Email: _____

Signature _____ Date: _____

The personal information in this form is being collected by Lethbridge Housing Authority under section 33(c) of the Freedom of Information and Protection of Privacy Act for the purpose of administering applications for subsidized housing or rental benefits. If you have questions regarding the collection of this information, please contact Lethbridge Housing Authority at (403) 329- 0556.