



BANK REFERENCE FORM

To: _____

Name: _____

Fax: _____

Account #: _____

To Whom It May Concern:

I hereby authorize you to give KG Group (including but not limited to K&G Apartment Holdings Inc., K&G Apartment Holdings II Inc., K&G Oakburn Apartments I Ltd., Mikegold Construction and/or 35 Canyon Avenue Limited) information as to my financial responsibility. Please complete the bottom section of this letter and answer all questions. **Please fax this form to 416-487-7575 or email leasing@myrental.ca.**

Signature of Applicant

Reply:

Date Account Opened: _____

Type of Account: _____

N.S.F. Cheques, if any: _____

Present Balance: _____

Loans:

Loan Amount: _____ Present Balance: _____

A. Monthly Payments: _____

B. Date of 1st Payment: _____

C. Date of Last Payment: _____

Paying Habits: _____

Remarks: _____

Bank Contact
(Please Print)

Authorized Bank Signature
and Bank Stamp

Bank Phone #: _____