TENANTS CONTACT INFORMATION & ADDITIONAL OCCUPANTS

(Please print clearly)	
Address:	
Tenant(s):	Age:
NAME:	
NAME:	
Additional Occupants:	
NAME:	
Relationship to Tenant:	
NAME:	
Relationship to Tenant:	Age:
NAME:	
Relationship to Tenant:	Age:
NAME:	
Relationship to Tenant:	Age:
Pet(s): yes or no Describe:	
Kindly please ensure that this form is filled out completely and relater then July 15, 2022.	eturned to Camwood Properties Ltd. no
This form can be returned by regular mail or by leaving a copy in the hallway. You may request a copy to be provided for your reco	
If you have any questions, or require any assistance, please conta	ct our office at 416 598 3345.
Sincerely,	
Amalia De Luca Property Manager	

Camwood Properties Ltd.

269 Richmond Street W. Suite 101 Toronto, Ontario M5V 1X1