

Cavendish Lane Property Management Rental Application

Each applicant over the age of 18 must complete their own application.

Property Location		Application Fee		Security Deposit	
Summerside, PE		N/A		\$1,350.00	
Anticipated Move In Date		Anticipated Move Out Date		Monthly Rent	
01-Sep-24		Aug 31, 2025 with option to renew		\$1,350.00	
Personal Information					
Last	First	MI	SIN# (optional)	Birth Date	Email
Cudmore	Alyson	M	132586181	05/30/1992	cudmorealysongmail.com
Other Names Used		Home Phone		Mobile Phone	
				(437) 655-2421	
				240582	
Other Proposed Occupants		Age		Relationship	
1) Cody Beznec		33		Partner	
2)					
3)					
Other Information			Vehicles		
Emergency Contact		Relationship		Phone	
Lea-anne Whalen		Cousin		(902) 218-6311	
Residency History			Vehicles		
Address		Current Residence		Prior Residence	
City, Province & Postal Code		23 Spruce Crt		719 Maniatutu Rd, Pongakawa	
		Brackley beach, PE C1E 2X7		4132 Hopedale Rd	
		Bay of plenty New Zealand 3186		Hunter River, PE C0A 1N0	
Monthly Payment or Rent		Rent or Own		How Long?	
		Rent		1+ years	
		Rent		3+ years	
		\$500		\$150 per week	
Dates of Residency		From		To	
		06/2023		Present	
		01/2020		06/2023	
Landlord or Mortgage Company		From		To	
		Jamie Cudmore		Georgia Nichols	
		Phone: (902) 394-1866		Phone: georgia.k.nichols@hotmail.com	
Reason for Leaving		From		To	
		To relocate to Summerside/ To have own space		Returned home to Canada	
Employment History					
Employer		Current		Prior	
Address <td colspan="2">Health PEI (PE home)</td> <td colspan="2">Masonic care/ Med-call Health Personell</td>		Health PEI (PE home)		Masonic care/ Med-call Health Personell	
Phone <td colspan="2">75 Maypoint Rd, Charlottetown</td> <td colspan="2">Health PEI (Wedgewood)</td>		75 Maypoint Rd, Charlottetown		Health PEI (Wedgewood)	
Name of Immediate Supervisor <td colspan="2">(902) 368-4607</td> <td colspan="2">Mount Maunganui</td>		(902) 368-4607		Mount Maunganui	
Position/Job Title <td colspan="2">Kim Coady</td> <td colspan="2">jessie@medcall.co.nz</td>		Kim Coady		jessie@medcall.co.nz	
Dates of Employment <td colspan="2">Resident Care Woker</td> <td colspan="2">(902) 888-8340</td>		Resident Care Woker		(902) 888-8340	
<td colspan="2">Caregiver</td> <td colspan="2">Cathy Fischer</td>		Caregiver		Cathy Fischer	
<td colspan="2">Resident Care Worker</td> <td colspan="2">Resident Care Worker</td>		Resident Care Worker		Resident Care Worker	
<td colspan="2">From</td> <td colspan="2">To</td>		From		To	
<td colspan="2">10/2023</td> <td colspan="2">Present</td>		10/2023		Present	
<td colspan="2">02/2020</td> <td colspan="2">06/2023</td>		02/2020		06/2023	
<td colspan="2">02/2016</td> <td colspan="2">09/2018</td>		02/2016		09/2018	
Monthly Gross Pay		From		To	
<td colspan="2">\$2800</td> <td colspan="2">\$2800</td>		\$2800		\$2800	
<td colspan="2">\$2800</td> <td colspan="2">\$2300</td>		\$2800		\$2300	
Reason for Leaving		From		To	
<td colspan="2">n/a</td> <td colspan="2">Returned home to Canada</td>		n/a		Returned home to Canada	
<td colspan="2">Left Canada to travel</td> <td colspan="2"></td>		Left Canada to travel			

Credit History					
Credit Cards Auto Loans Other Loans List any other financial obligations and their minimum monthly payments	Bank or Institution Name	Balance Due	Bank or Institution Name	Balance Due	
	Tangerine	\$0			
	n/a				
	Line of credit - Tangerine	\$0			
	Obligations	Monthly Payment	Obligations	Monthly Payment	
	Cell phone	\$45			
Personal References					
	Name	Address		Telephone	
Reference 1	Jay Arellano (RN supervisor)			(782) 377-2518	
Reference 2	Jamie Pound (Family friend)			(902) 393-1244	
Reference 3	Erica Jeffrey (Co-worker)			(902) 888-7570	
General Background Information					
Have any of the occupants listed above:	Convicted of a Crime?	Been Evicted?	Declared Bankruptcy?	Broken a lease?	Been Party to a lawsuit?
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
By signing, the applicant represents that all of the above information is true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report or background check. If any information is false, the Landlord is entitled to reject the application. The applicant also confirms that they are a non-smoker with no pets.			Signature		
			Alyson Cudmore		
			Date		
			August 10th, 2024		