

APPLICATION FOR RENTAL

Applicant's Last Name	First	Initial	Birthdate	Driver's License No. & State	Soc. Sec. No.
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated	Spouse's Name		Birthdate	Driver's License No. & State	Soc. Sec. No.
Expected Move-In Date	There will be _____ people occupying the apartment		Names & Ages of all residents to appear on lease (use back of page if needed)		
Do you have pet(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	How many?	Type and size (keeping of pets requires a pet deposit and signed pet agreement)		Who referred you?	

PART I CONTACT INFORMATION

Applicant's email address(es)	Cell Phone No.
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PART II RESIDENCE HISTORY (LAST 2 YEARS)

Present Address	City	State	Zip	How long?	Area Code Phone	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Name & Address of Present Landlord or Mortgage Co.					Area Code Phone	Monthly Pymt.
Previous Residence Address	Previous Landlord or Apt. Community				Area Code Phone	How long?
Previous Residence Address	Previous Landlord or Apt. Community				Area Code Phone	How long?

PART III EMPLOYMENT HISTORY (LAST 3 YEARS)

Applicant Employed By	Supervisor's Name			How long?		
Address	City	State	Zip	Phone	Position Held-Occupation	Salary \$ _____ per _____
Monthly Income source	<input type="checkbox"/> Salary		<input type="checkbox"/> Commission		<input type="checkbox"/> Tips	
	<input type="checkbox"/> Govt. Asst.		<input type="checkbox"/> Other _____			
Previous Employment	Supervisor's Name			How long?		
Address	City	State	Zip	Phone	Position Held-Occupation	Salary \$ _____ per _____
Spouse Employed By	Supervisor's Name			How long?		
Address	City	State	Zip	Phone	Position Held-Occupation	Salary \$ _____ per _____
Monthly Income source	<input type="checkbox"/> Salary		<input type="checkbox"/> Commission		<input type="checkbox"/> Tips	
	<input type="checkbox"/> Govt. Asst.		<input type="checkbox"/> Other _____			
Spouse-Previous Employment	Supervisor's Name			How long?		
Address	City	State	Zip	Phone	Position Held-Occupation	Salary \$ _____ per _____

PART IV CAR INFORMATION

No. of vehicles on property	Do you have any recreational vehicles, vans, boats, motorcycles? If so, specify.	
Auto No. 1 - Type	License No.	State
Auto No. 2 - Type	License No.	State

PART V

Have you ever been evicted from any tenancy? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Do you have a criminal record? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list _____						
In case of emergency, call	Relationship	Address	City	State	Zip	Area Code Phone

Applicant hereby authorizes verification of any and all information set forth on this Application, including the release of information by any bank or saving and loan, employer (present and former), any lender, and any other source regarding your credit record and any criminal record. All such information herein, and released as authorized above, will be kept confidential. APPLICANT REPRESENTS THAT THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND COMPLETE. Material misstatements or representations on this application will constitute a default under the Lease or Rental Agreement between the Parties. Applicant understands that there is a nonrefundable (application) processing fee and the deposit given by Applicant herewith is refundable only if this application is rejected. In addition, OWNER agrees to take the dwelling off the market while OWNER considers the approval of the applicant and co-applicant. neither the application or application deposit may be withdrawn by applicant or co-applicant. If applicant or co-applicant withdraws his application or changes his mind about the dwelling the Application deposit of all applicants will be retained by OWNER.

Application Fee \$ _____ + Admin Fee \$ _____ + Deposit \$ _____ = \$ _____

Referred By _____ Date _____ 20____

Signature of Applicant _____ Signature of Spouse _____

Received by _____
Leasing Agent Date