

RENTAL APPLICATION FOR _____

A \$25.00 non-refundable application fee is required for investigation

Instructions: A separate application must be completed by each applicant (even if married). Completely fill out each blank and sign where indicated.

PERSONAL

FIRST NAME _____ MIDDLE INITIAL _____ LAST NAME _____
MARITAL STATUS _____ MARRIED / DIVORCED SINCE _____ FORMER SPOUSE _____
BIRTH DATE _____ SS# _____ DRIVERS LICENSE ST _____ # _____

ADDRESSES

PRESENT ADDRESS _____ CITY _____ ST _____ ZIP _____
RENT / MONTH _____ PRESENT PHONE _____ CELL PHONE _____
LANDLORD _____ PHONE _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
IS RENT UP TO DATE YES NO *HAVE YOU GIVEN NOTICE?* YES NO *HAVE YOU BEEN ASKED TO LEAVE?* YES NO

PREVIOUS ADDRESS _____ CITY _____ ST _____ ZIP _____
RENT / MONTH _____ PRESENT PHONE _____ CELL PHONE _____
LANDLORD _____ PHONE _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
WAS RENT UP TO DATE YES NO *HAD YOU GIVEN NOTICE?* YES NO *HAD YOU BEEN ASKED TO LEAVE?* YES NO

NEXT PREVIOUS ADDRESS _____ CITY _____ ST _____ ZIP _____
RENT / MONTH _____ PRESENT PHONE _____ CELL PHONE _____
WAS RENT UP TO DATE YES NO *HAD YOU GIVEN NOTICE?* YES NO *HAD YOU BEEN ASKED TO LEAVE?* YES NO

OCCUPANTS

NUMBER TO OCCUPY _____
NAME _____ RELATIONSHIP _____ BIRTH DATE _____
NAME _____ RELATIONSHIP _____ BIRTH DATE _____
NAME _____ RELATIONSHIP _____ BIRTH DATE _____
NAME _____ RELATIONSHIP _____ BIRTH DATE _____
NAME _____ RELATIONSHIP _____ BIRTH DATE _____
PETS YES NO IF YES, GIVE DETAILS (#, TYPE, SIZE) _____

VEHICLES

MAKE/MODEL _____ COLOR _____ STATE _____ PLATE _____ LIEN HOLDER _____
MAKE/MODEL _____ COLOR _____ STATE _____ PLATE _____ LIEN HOLDER _____

EMPLOYMENT

EMPLOYER _____ SINCE _____ SUPERVISOR _____ PHONE _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
WHAT DO YOU DO? / JOB / TITLE _____ WORK HRS. / WEEK _____
PREVIOUS EMPLOYER _____ SINCE _____ SUPERVISOR _____ PHONE _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
WHAT DO YOU DO? / JOB / TITLE _____ WORK HRS. / WEEK _____

INCOME

CURRENT INCOME \$ _____ Weekly Bi-Weekly Monthly Yearly SOURCE _____
CURRENT INCOME \$ _____ Weekly Bi-Weekly Monthly Yearly SOURCE _____
CURRENT INCOME \$ _____ Weekly Bi-Weekly Monthly Yearly SOURCE _____
BANK / CREDIT UNION _____ ACCT. # _____
BANK / CREDIT UNION _____ ACCT. # _____

REFERENCES

RELATIVE _____ RELATION _____ PHONE # _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
NON- RELATIVE _____ RELATION _____ PHONE # _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
NON- RELATIVE _____ RELATION _____ PHONE # _____
ADDRESS _____ CITY _____ ST _____ ZIP _____
EMERGENCY CONTACT _____ RELATION _____ PHONE # _____

CREDIT ACCOUNTS

CURRENT (OPEN) INCLUDE CREDIT CARD(S)	CURRENT?
CREDITOR'S NAME _____ ACCT. # _____ PMT. \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
CREDITOR'S NAME _____ ACCT. # _____ PMT. \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
CREDITOR'S NAME _____ ACCT. # _____ PMT. \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
CREDITOR'S NAME _____ ACCT. # _____ PMT. \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO
CREDITOR'S NAME _____ ACCT. # _____ PMT. \$ _____	<input type="checkbox"/> YES <input type="checkbox"/> NO

Explain any "YES" answers on back with names and details.

Have you ever been sued for bills? YES NO Have you ever been sued for eviction? YES NO
Have you even been bankrupt? YES NO Have you ever been guilty of a felony? YES NO
Have you ever broken a lease? YES NO Is the total move-in amt. available now ? YES NO
Are you a registered sex offender? YES NO

Name in which gas bill is now billed and account number _____ # _____
Name in which electric bill is now billed and account number _____ # _____
Name in which telephone bill is now billed and account number _____ # _____
Name in which sewer/water bill is now billed and account number _____ # _____

Applicant authorizes the owner the contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to investigate applicant.

All the information is true, accurate and complete to the best of applicant's knowledge. Owner reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

X _____ DATE _____
APPLICANT

If you have a question about the interpretation or legality of this form, please consult an attorney or other qualified person.