



RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated.

PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	S.S.#	-	-
DATE OF BIRTH / /	When would you like to move in?			DRIVERS LICENSE #	STATE
PHONE - -	CELL HOME	PHONE - -	EXT.	HOME	WORK
PRESENT HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME	PRESENT LANDLORD			LANDLORD PHONE - -	
REASON FOR LEAVING	AMOUNT OF RENT			Is your present rent up to date? YES NO	
PREVIOUS HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME	PREVIOUS LANDLORD			LANDLORD PHONE - -	
REASON FOR LEAVING	AMOUNT OF RENT			Was your rent up to date? YES NO	
NEXT PREVIOUS HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME	NEXT PREVIOUS LANDLORD			LANDLORD PHONE - -	
REASON FOR LEAVING	AMOUNT OF RENT			Was your rent up to date? YES NO	

PROPOSED OCCUPANT(S)

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S)

NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE
NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE
NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE

VEHICLE(S) INFORMATION

YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE

EMPLOYMENT

CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - -	EXT: YEARS EMPLOYED
ADDRESS	CITY/STATE/ZIP	
CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE - -	EXT: YEARS EMPLOYED
ADDRESS	CITY/STATE/ZIP	

INCOME

CURRENT INCOME \$ _____	WEEKLY	BIWEEKLY	MONTHLY	YEARLY	SOURCE	PROOF OF INCOME	YES	NO
CURRENT INCOME \$ _____	WEEKLY	BIWEEKLY	MONTHLY	YEARLY	SOURCE	PROOF OF INCOME	YES	NO
CURRENT INCOME \$ _____	WEEKLY	BIWEEKLY	MONTHLY	YEARLY	SOURCE	PROOF OF INCOME	YES	NO



RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated.

CREDIT CARD / FINANCIAL INFORMATION

CAR LOAN LIEN HOLDER	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	—	—
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	—	—
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	—	—
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	—	—
CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	—	—
BANK ACCOUNT NAME OF BANK	BALANCE	MONTHLY PAYMENT	ACCOUNT NUMBER		

EMERGENCY / PERSONAL REFERENCE INFORMATION

EMERGENCY CONTACT	PHONE — — CELL HOME	PHONE — — HOME WORK
RELATION	ADDRESS	CITY/STATE/ZIP
EMERGENCY CONTACT	PHONE — — CELL HOME	PHONE — — HOME WORK
RELATION	ADDRESS	CITY/STATE/ZIP
PERSONAL REFERENCE	PHONE — — CELL HOME	PHONE — — HOME WORK
RELATION	ADDRESS	CITY/STATE/ZIP
PERSONAL REFERENCE	PHONE — — CELL HOME	PHONE — — HOME WORK
RELATION	ADDRESS	CITY/STATE/ZIP

APPLICANT QUESTIONNAIRE / AUTHORIZATION

Has applicant ever been sued for bills?	YES	NO	Has applicant ever been locked out of their apartment by the sheriff?	YES	NO
Has applicant ever been bankrupt?	YES	NO	Has applicant ever been brought to court by another landlord?	YES	NO
Has applicant ever been guilty of a felony?	YES	NO	Has applicant ever moved owing rent or damaged an apartment?	YES	NO
Has applicant ever broken a Lease?	YES	NO	Is the total move-in amount available now (rent and deposit)?	YES	NO

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant. All information is true, accurate and complete to the best of applicant's knowledge. Landlord 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 SIGNATURE

DATE

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

NOTES:
