

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.

PROPERTY INFORMATION

Street Address of the property applicant desires to rent	City/State/Zip
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PERSONAL INFORMATION

First Name	Middle	Last	SS#
Date of Birth	Marital Status		Drivers License # State
Home Phone	Cell Phone		Email
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?
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?
Next 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?

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)

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	Source	Proof of Income
Current Income	Source	Proof of Income
Current Income	Source	Proof of Income

CREDIT CARD / FINANCIAL INFORMATION

Car Loan Loin 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	Balance owed	Monthly Payment	Creditor's Phone #
Bank Account/Bank Name	Balance	Monthly Payment	Account Number

EMERGENCY / PERSONAL REFERENCE INFORMATION

Emergency Contact	Home Phone	Cell Phone
Relationship	Address	City/State/Zip
Emergency Contact	Home Phone	Cell Phone
Relationship	Address	City/State/Zip
Personal Reference	Home Phone	Cell Phone
Personal Reference	Home Phone	Cell Phone

APPLICATION QUESTIONARE / AUTHORIZATION

Has applicant ever been sued for bills?	Has applicant ever been locked out of their apartment by the sheriff?
Has applicant ever been bankrupt?	Has applicant ever been brought to court by another landlord?
Has applicant ever been guilty of a felony?	Has applicant ever moved owing rent or damaged an apartment?
Has applicant ever broken a Lease?	Is the total move-in amount available now (rent and deposit)?

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other source 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 _____
Applicant's Signature

Date

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

Notes:

