

# RESIDENTIAL RENTAL APPLICATION

Applying for: (Check all that apply)

Studio \_\_\_ 1 Bdrm \_\_\_

1 Bdrm Upgraded \_\_\_

2 Bdrm \_\_\_



Notice: All adult applicants (18 years or older) must complete a separate application for rental. If a question does not apply mark N/A.

## APPLICANT INFORMATION

LAST NAME	FIRST NAME	M.I.	SSN	DRIVER'S LICENSE #
BIRTH DATE	HOME PHONE	CELL PHONE	WORK PHONE	EMAIL

## CURRENT ADDRESS

STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD / MANAGER NAME		LANDLORD PHONE
MONTHLY RENT	REASON FOR LEAVING			

## PREVIOUS ADDRESS

STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD / MANAGER NAME		LANDLORD PHONE
MONTHLY RENT	REASON FOR LEAVING			

## EMPLOYMENT & INCOME INFORMATION

CURRENT EMPLOYER		OCCUPATION		MONTHLY GROSS PAY
SUPERVISOR NAME		SUPERVISOR PHONE	START DATE	
PREVIOUS EMPLOYER		OCCUPATION		MONTHLY GROSS PAY
SUPERVISOR NAME		SUPERVISOR PHONE	LENGTH OF EMPLOYMENT	

OTHER INCOME TO BE CONSIDERED	AMOUNT OF INCOME
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## EMERGENCY CONTACT

1# NAME	PHONE	RELATIONSHIP	WORK PHONE NUMBER
ADDRESS			
2# NAME	PHONE	RELATIONSHIP	WORK PHONE NUMBER
ADDRESS			

In the event of serious injury or death of Applicant, the above listed person(s) may \_\_\_\_\_ or may not \_\_\_\_\_ enter the apartment, remove and / or store all contents found in the apartment, adjoining areas and mailbox.

**LIST NAMES AND BIRTH DATES OF ALL OCCUPANTS UNDER 18 YEARS**

NAME	DOB	RELATIONSHIP	
NAME	DOB	RELATIONSHIP	

**VEHICLE INFORMATION**

MAKE & MODEL	COLOR	YEAR	LICENSE PLATE NO & STATE
MAKE & MODEL	COLOR	YEAR	LICENSE PLATE NO & STATE

**PETS: ALL PETS MUST BE SPAYED/NEUTERED**

TYPE	BREED	WEIGHT	SHOTS UP TO DATE?	PET NAME
TYPE	BREED	WEIGHT	SHOTS UP TO DATE?	PET NAME

**OTHER INFORMATION**

Has applicant listed above ever:

1. Been evicted or asked to move out? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Broken a rental agreement or lease contract? Yes \_\_\_\_\_ No \_\_\_\_\_
3. Declared bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_
4. Been sued for non-payment of rent? Yes \_\_\_\_\_ No \_\_\_\_\_
5. Been sued for damages to a rental property? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Convicted sex offender? Yes \_\_\_\_\_ No \_\_\_\_\_

If answer to any of the above questions is "yes", please explain \_\_\_\_\_

I declare that all my statements on this application are true and complete. Landlord is authorized to verify such information by consumer reports, rental history, employment reports, criminal reports and other means, but is not required to make verifications or investigations. Failure to answer the above inquiries or false information given above shall entitle Landlord to reject this application, retain application fee(s) and terminate resident's right of occupancy. Landlord reserves the right to regularly and routinely furnish information to consumer reporting agencies about performance of lease obligations by me. Such information may be reported at any time and may include both favorable or unfavorable information regarding my compliance with the lease, rules and financial obligations. I understand that this is an application and does not constitute a lease agreement in whole. I understand this application is valid for 90 days.

I understand that my DEPOSIT may be applied toward any rent loss, advertising cost, re-rental fees, ect., if this application is approved and I am unable to fulfill the conditions of occupancy. I hereby acknowledge the non-refundable application fee is to be used in the processing of the application

SIGNATURE/APPLICANT \_\_\_\_\_

DATE \_\_\_\_\_

**Office use only**

Date Received: \_\_\_\_\_

Application Fee \$ \_\_\_\_\_ Cash Check M/O Deposit \$ \_\_\_\_\_ Cash Check M/O

Apartment address \_\_\_\_\_ Rent \_\_\_\_\_ Start Date \_\_\_\_\_ Lease Term \_\_\_\_\_