App Fee Paid Date

RENTAL APPLICATION Equal Housing Opportunity

Please Note – Every adult living in the property needs to fill out a separate application. There is a \$30 application fee for each adult, application fee is NON-REFUNDABLE. Please allow 4-5 business days for processing.

The undersigned hereby makes an application to rent unit #		located at:		
Anticipated move date of	at a monthly rent of \$	and security deposit o	f \$	
PLEASE TELL US ABOUT YOURSEI Full Name		Cell Phone () -		
Date of Birth		!		
Email Address:			<u></u>	
Names of Dependents				
Dependents Date of Birth				
List All Pets				
PLEASE GIVE RESIDENTIAL HISTO Current Address	RY (LAST 3 YEARS)	Stat	o 7in	
Month/Year Moved In	Apt# City	Siai	e	
Reasons for Leaving Owner/Agent	 Rent/Month \$_			
Owner/Agent		Phone ()		
Previous Address	Ant# City	State	. Zin	
Previous Address Month/Year Moved In	Month/Year Moved Out	Re	ent/Month \$	
Owner/Agent		Phone ()		
PLEASE DESCRIBE YOUR CREDIT	HISTORY			
Have you declared bankruptcy in the p		Yes	No	
Have you ever been evicted from a rer				
Have you ever been evicted from a rental residence? Yes No Have you had two or more late rental payments in the past year? Yes No				
Have you ever been convicted of a feld			No	
PLEASE PROVIDE YOUR EMPLOYM	MENT INFORMATION			
Your Status:Full TimePa		nployed		
Employer				
Dates employed				
Supervisor Name		Phone ()		
Gross Monthly Income \$				
If employed by above less than 12 more	nths, give name & phone of previo	us employer or school:		
If you have other sources of income the employer, etc.) who we may contact fo income unless you want us to consider Amount \$	r confirmation. You do not have to			

PLEASE LIST YOUR RE	FERENCES	
Banking:	Location	
Name	Eocation	
Emergency Contact:		
Name	Address Relationship	
Prione	Relationship	
Driver's License:		
Your Driver's License Nur	mber State	
Vehicle Information:		
	Year	License Plate State
ADDITIONAL INFORMA	TION:	
Please give any additiona	al information that might help owner/mana	agement evaluate this application?
Where may we reach you Day Phone # ()	u to discuss this application? Night Phone # ()	
that the rental is to be pay to the agent to accept this statement made above be	yable the first day of each month in advars s application. I warrant that all statements	and upon the set conditions above set forth and agree nce. As an inducement to the owner of the property and above set forth are true; however, should any nent of facts, all of the deposit will be retained to offset
prepared whereby inform	ation is obtained through personal intervi	lication, and investigative consumer report may be ews with others with whom I may be acquainted. This , personal characteristics and mode of living.
AUTHORIZATION Relea	se of Information	
I agree to permit an invergenting an apartment wi		banking and employment for the purposes of
The above information,	to the best of my knowledge, is true a	nd correct.
Please sign: XName of A	pplicant Date	
with tenants. We strive	to find the right match for you but dem	s it contracts with, but also promises fair dealings nand in rentals is high. We CANNOT guarantee e as we have to pay the company that produces the
APPLICANT: PLEASE I	DO NOT WRITE BELOW (FOR OFFICE	USE ONLY)
Deposit of \$	Received by	Date
OFFICE NOTES:		