RE/MAX of Alamogordo, Ltd. Property Management 3410 N White Sands Blvd. Alamogordo, NM 88310 575-437-0914 * Fax 575-434-3704

Rental Application

A copy of your photo ID will be needed when application is submitted.

Proof of income needs to be submitted with application.

Notice: All rentals are available on a "first come, first serve basis". Please read disclaimer at the end of application before signing. All areas are to be filled out as completely as possible. If you need more space please use back side of paper. Please include phone numbers to all places rented, worked, etc., not doing so will cause application to be rejected. The office must be able to verify all information. If any person living in property is 18 or older, they will need to fill out an application.

Address Applying for:				
Move In Date:				
Primary Applicant informat	ion			
Name of Applicant				
Home phone number:	Cell numb	oer:	Other:	
Other names used within the la	ast 3 years?			
Current Address				
City, State, Zip				
RentOwn Ren				
Reason for leaving current res	idence?			
Name & Phone number of Ow	ner/Manager			
Previous address(es) (past 2 ad	ddresses or past 5 years) if mo	ore space is needed please use ba	ack of this application	
Previous rent amount:\$			red out:	
Reason for Leaving?				
Name & Phone number of ow	ner/manager			
Social Security #:	Drivers Lic. #			
Date of Birth:	# Of People R	# Of People Residing In Home:		
Number of Pets	Kind, Weight, Breed, Age:			

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Primary Applicant Employme	ent Information:	
Present Employer	Position	
Date Started:	Supervisor's Name:	
Address of Employer:		
	Monthly Income:	
Other non-working income you	want considered. Please explain:	
Co-Applicant Information		
Name of Co-Applicant:		
	Cell Number:	
Other names used within the las	at 3 years?	
Current Address;		
	Amount: \$ Date Mo	
Reason for leaving current resid	lence?	
	er/manager	
Previous address(es) (past 2 add	dresses or past 5 years) if more space is n	needed please use back of this
application		
Previous rent amount: \$	Date Moved In:	Date Moved Out:
Reason for Leaving?		
Name & Phone number of owner	er/manager	
	Drivers Lic. # & State	
Date of Birth:	# Of People residing in hor	me
Co-Applicant Employment In	formation:	
Present Employer	Position_	
Date you started:	Supervisor's Name:	
Address of Employer:		
Work Phone:	Monthly Income	

Other non-working income you want considered. Please explain:
Rental/Criminal History:
Have you, your spouse, or any occupant listed in the Application has ever:
Been evicted or asked to move out? If so who:
Moved out of a dwelling before the end of the lease term without owner's consent? If so who:
Been sued for property damage? If so who:
Declared Bankruptcy? If so who:
Been sued for rent? If so who:
Been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence
to another person or destruction of property, or a sex crime that has not been resolved by any method?
If so who:
Been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence
to another person or destruction of property, or a sex crime that has been resolved by conviction, probation,
deferred adjunction, court ordered community supervision, or pretrial diversion?
If so who:
If you checked any of the above please explain. Please indicate the year, location, and type of each
felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or
sex crime other than those resolved by dismissal or acquittal. If none of the above are checked you are
representing the answer is no to all questions.
Credit Information
Do you or the co-applicant have an open bank account? Yes No
If so please provide the following information:
Checking Acct #, Bank & Phone #
Savings Acct #, Bank & Phone #
Do you have an auto loan? Yes No Lienholder

Phone Number	Account Number	
Do you have any credit cards? Yes No	_	
Please list:		
Other credit references: (please provide 2)		
Creditor	Phone #	
Acct#	Exp date	
Creditor	Phone #	
Acct #	Exp date	
Household Information		
Please list all vehicles that will be parked at res	sidence:	
Make/Model	Year	
License Plate # & State	Color	
Make/Model	Year	
License Plate # & State	Color	
Work References: (manager, asst. mgr, owner	for the last 3 years)	
Name	Phone	
Name	Phone	
Name	Phone	
Personal Reference:		
Name	Phone	
Name	Phone	
Emergency Contact:		
Name	Phone	
Address	Address Relationship	
For Office Use Only		
Date application was received		

References Che	ecked	 	
App Rej.	App Appr.		

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Alamogordo, NM 88310
Office 575-437-0914
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Authorization to verify information/Disclaimer:

I/We give RE/MAX of Alamogordo, Ltd. authorization to gather information regarding rental history, credit history, employment history and verify income. By signing this document, I/We hereby agree that the above is true and correct to the best of my/our knowledge. I/We hereby authorize verification of the information given on this application from any source(s) listed above. False information entitles the Owner/Owner Representative to reject this application and/or other documents as necessary and retain any deposits as fee for processing the application.

If RE/MAX of Alamogordo, Ltd. and/or the Owner chooses to allow the use of a paid security deposit to place a hold on the property for rent (for a maximum of two weeks), it is understood if you choose not to rent the property at any time during the time period the property is held for you, RE/MAX of Alamogordo, Ltd. is not required to refund the security deposit.

Name of applicant(s)		
Signature of Applicant	Date	
Signature of Co-Applicant	Date	