

RENTAL APPLICATION

• All Sections Must Be Completed

APPLICANT INFORMATION

Full Name (First, Middle, Last)	Date of Birth	Social Security #	Driver's License #
Any Other Names Used In The Past	Home Phone	Cell Phone	

CO-APPLICANT INFORMATION

Full Name (First, Middle, Last)	Date of Birth	Social Security #	Driver's License #
Any Other Names Used In The Past	Home Phone	Cell Phone	

ALL OTHER PROPOSED OCCUPANTS

Full Name (First, Middle, Last)	Date of Birth	Relationship to Applicant(s)

RENTAL/RESIDENTIAL HISTORY

	Current Residence	Previous Residence	Prior Residence
Street Address			
City			
State & Zip			
Last Rent Amount Paid			
Owner/Manager Name & Phone Number			
Reason for Leaving			
Is/Was Rent Paid in Full?			
Were You Asked to Move?			
Name(s) in Which Your Utilities Are Now Billed			
Dates of Residency	From/To	From/To	From/To

EMPLOYMENT HISTORY (APPLICANT)

	Current Employer	Previous Employer	Prior Employer
Employer's Name			
Employer's Address (Street, City, State, Zip)			
Employer's Phone			
Occupation			
Name of Supervisor			
Monthly Take-Home Pay			
Dates of Employment	From/To	From/To	From/To

CREDIT HISTORY (APPLICANT)

Have you declared bankruptcy in the past two years?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever been evicted from a rental residence?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you had two or more late rental payments in the past year?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever willfully or intentionally refused to pay rent when due?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever broken a lease?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever moved owing rent or damaged an apartment?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Have you ever been convicted of a felony?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

EXPENDITURES (APPLICANT) (include any car notes, insurance payments, furniture payments, etc.)

Paid To	Amount	How Often Paid	Approximate Pay-Off Date

EMPLOYMENT HISTORY (CO-APPLICANT)

	Current Employer	Previous Employer	Prior Employer
Employer's Name			
Employer's Address (Street, City, State, Zip)			
Employer's Phone			
Occupation			
Name of Supervisor			
Monthly Take-Home Pay			
Dates of Employment	From/To	From/To	From/To

CREDIT HISTORY (CO-APPLICANT)

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EXPENDITURES (CO-APPLICANT) (include any car notes, insurance payments, furniture payments, etc.)

Paid To	Amount	How Often Paid	Approximate Pay-Off Date

VEHICLES (Include Vehicles Belonging to Other Proposed Occupants)

Make	Model	Year	Color	License Plate #

REFERENCES

	Professional Referenc	Professional Referenc	Personal Referenc	Personal Referenc
Name				
Address (Street, City, State, Zip)				
Phone Number				
<i>By signing this application, you grant us permission to communicate with all of the contacts listed in this section.</i>				

EMERGENCY CONTACTS

	Name	Street Address	City, State, Zip	Phone Number
Primary Contact				
Secondary Contact				

GENERAL INFORMATION

Do any of the people who would be living in the residence smoke?	<input type="checkbox"/> YES <input type="checkbox"/> NO
When would you be able to move in?	
How many and what types of pets do you have?	
List any additional verifiable sources and amounts of income you wish to have considered.	
Do you have an e-mail address where you can be reached?	

AGREEMENT & AUTHORIZATION SIGNATURE

By signing below, I/we certify that the statements made on this application are true and correct. I/We hereby authorize a credit and/or criminal check to be made, verification of information I/we have provided, and communication with any and all names listed on this application. I/We understand that any discrepancy or lack of information may result in the rejection of this Application and/or immediate termination of the Lease Agreement. I/We understand that this is an application for tenancy and does not constitute a rental agreement in whole or part.

AUTHORIZATION FOR RELEASE OF INFORMATION

I authorize an investigation of my credit, tenant, and employment history for the purpose of renting dwelling from this owner/manager.

Name (Please Print):	Name (Please Print):
X	X
Signature	Signature
Date:	Date:

