



# RENTAL APPLICATION for \_\_\_\_\_



Application Date \_\_\_\_\_ Floor Plan Desired \_\_\_\_\_ Apt# \_\_\_\_\_  
 Move in Date Desired \_\_\_\_\_ Lease Term \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_  
 No. of Occupants \_\_\_\_\_ Pets  Yes  No Kind \_\_\_\_\_ Fee \$ \_\_\_\_\_ Pet Rent \$ \_\_\_\_\_

The application information is to be COMPLETED ACCURATELY and in its ENTIRETY. Return to the leasing office with a CURRENT GOVERNMENT ISSUED IDENTIFICATION CARD, DEPOSIT INCOME VERIFICATION and \$ \_\_\_\_\_ APPLICATION FEE or \$ \_\_\_\_\_ HOLD Deposit. Inaccurate or omissions of the requested information may cause delay or denial of consideration for residency.

## APPLICANT NAME

\_\_\_\_\_  
 FIRST MIDDLE LAST  
 / /

PHONE #S HOME CELL E-MAIL

DATE OF BIRTH \_\_\_\_\_ S.S. ID# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ ISSUE DATE \_\_\_\_\_

STATUS:  Single  Married  Widow  Divorced  Separated # Years \_\_\_\_\_ SPOUSE NAME \_\_\_\_\_

## CURRENT ADDRESS

\_\_\_\_\_  
 STREET CITY ZIP

DATES OF RESIDENCY \_\_\_\_\_ - \_\_\_\_\_ Own  Rent Monthly Rent or Mortgage Payment \$ \_\_\_\_\_

## LANDLORD/COMPANY

\_\_\_\_\_  
 NAME PHONE# FAX#

EMPLOYER \_\_\_\_\_ TITLE \_\_\_\_\_ SINCE \_\_\_\_\_ Gross Income per year \$ \_\_\_\_\_

## EMPLOYER ADDRESS

\_\_\_\_\_  
 CITY STATE PHONE#

VEHICLE \_\_\_\_\_

YEAR MAKE COLOR DRIVERS LICENCE# EXPIRATION DATE

## EMERGENCY CONTACTS:

\_\_\_\_\_  
 NAME RELATION PHONE#

\_\_\_\_\_  
 STREET CITY STATE ZIP

\_\_\_\_\_  
 NAME RELATION PHONE#

\_\_\_\_\_  
 STREET CITY STATE ZIP

HAVE YOU EVER BEEN CHARGED/ARRESTED OF A CRIME AGAINST PERSONS OR PROPERTY?  YES  NO STATE \_\_\_\_\_ YEAR \_\_\_\_\_

FORECLOSED ON OR EVICTED  YES  NO YEAR \_\_\_\_\_ FILED BANKRUPTCY  YES  NO YEAR \_\_\_\_\_

I hereby deposit \$ \_\_\_\_\_ as partial security deposit on the above premise. I understand this deposit may be applied towards any rent loss, advertising costs, or unusual administration fees if this application is approved and I am unable to fulfill the conditions of this agreement. The undersigned does hereby consent that all information stated on this application may be verified and processed through a credit agency. This includes a full credit screening and criminal background check. I hereby release all parties from any liability in connection with the provision and use of such information. I understand that this application does not constitute any oral or written commitment on the part of the agent.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

LIST ALL CHILDREN OR DEPENDENTS THAT MAY OCCUPY THE PREMISE NOT INCLUDING OTHER CO-APPLICANTS:

\_\_\_\_\_  
 NAME RELATION AGE NAME RELATION AGE