## **RENTAL APPLICATION**

- Each adult (18 or older) must fill out a separate application
- There is a <u>non-refundable</u> fee of \$10/adult to apply

First Middle		Last		Birth Da	ate	So	Social Security #			Driver's License #	
Any Other Names You've	e Used	In The Past			Home	Pho	one		Cell	Phone	
All Other Proposed Occu	ıpants						Birth Date	Relation	ship	To Applicant	
DENITAL (DEGIDENCE LIIOTOD) (											
RENTAL/RESIDENCE I	HIST				Drovi	0110	Posidonos			Prior Residence	
Street Address		Current Residence			Previous Residence					Prior Residence	
City											
State & Zip											
Last Rent Amount Paid											
Owner/Manager											
and Phone Number											
Reason for leaving											
Is/Was rent paid in full?											
Did you give notice?											
Were you asked to move?											
Name(s) in which your											
utilities are now billed:											
		From/To			From/To					From/To	
Dates of Residency											
EMPLOYMENT HISTOI	RY										
		Current Employment			Previous Employment					Prior Employment	
Employed By											
Address											
Employer's Phone											
Occupation											
Name of Supervisor											
Monthly Gross Pay											
		From/To			From/To					From/To	
Dates of Employment											
ODEDIT LUCTORY								l.			
CREDIT HISTORY		Donk	/Inatia	tution N	lama			Polone	. On	Denosit or Balance Owed	
Savings Account	Dank/	ame			Dalance	Balance On Deposit or Balance Owed					
Checking Account											
Credit Card											
Auto Loan											
Auto Loan											
VEHICLES (Include vehicles belonging to other proposed occupants also)											
Make Model						Year			License Plate		

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REFERENCES & E	MERGENCY CONTA	ACTS						
Name	Doctor		Lawyer		Nearest Relative Living Elsewhere			
Street Address								
City								
State & Zip								
Phone Number								
	I you grant us permission to c	ommunicate with	all the contacts listed in this section in the	e event v	Ne can't locate you. Furthermore, if you			
abandon the apartmen	nt for any reason then you gra	nt us permission	to allow your relative listed above to rem	ove all co	ontents of the dwelling on your behalf.			
GENERAL INFORM	IATION							
Have you ever been so	erved a late rent notice?	Do any of the who would be	he people be living in the apartment smoke?	How do vo	long ou think you would be renting from us?			
•			· ·		, , , , , , , , , , , , , , , , , , ,			
Have you ever filed for	bankruptcy? If so, when?	When	would you be able to move in?	Ha	ave you ever been convicted of a felony?			
Have you ever been	served an eviction noti	co2 If so wh	an? How many note do you hav	o (list	Type, Breed, approx Weight & Age)?			
Tiave you ever been	served an eviction noti	Ce: 11 50, WII	en: How many pers do you hav	ve (iist	Type, Breed, approx Weight & Age):			
Have you had any re	occurring problems wi	th your curre	ent apartment or landlord? If yes	, please	e explain:			
Why are you moving from your current address?								
List surveyifishle se		!	wish to have a naidened (autism	-1\.				
List any verifiable so	ources and amounts of	income you	wish to have considered (option	aı):				
If you were to run into	financial difficulty in the	e future and c	couldn't come up with the money to	o pay th	ne rent, do you know someone that			
-	<del>-</del>		ne, address, & phone # so that we d					
Have you been a par	ty to a lawsuit in the pa	ast? If yes, pl	ease explain why:					
We may run a credit	check and a criminal h	ackaround c	heck is there anything negative	we wil	I find that you want to comment on?			
Tro may run a oroan	oncok ana a ommula b	aongrouna o	neon io more anything negative	110 1111	i ilia tilat you want to comment on:			
How did you hear ab	out this apartment?		Do you have an e-mail address v	ve can	reach you at?			
		-		numbe	r. If you refer a friend and you each			
end up renting separ	rate apartments from us	s then we wil	Il pay you a referral reward.					
		Agreemen	t & Authorization Signatu	re				
					criminal check to be made, verification			
·		•			I understand that any discrepancy or			
					cation for an apartment and does not n-refundable fee to cover the cost of			
	_				nt. Any questions regarding rejected			
			d by a self-addressed stamped e					
	· ·	•	·					
Signature:			Date:					

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