

Rental Application

MUST BE FILLED OUT COMPLETELY – THANK YOU

Applicant Information

PROPERTY ADDRESS APPLYING FOR:

Name: (Last) (First) (Middle) (Maiden)

Date of birth: SSN: Driver's Lic. #:

Phone: Email address:

Have you ever been convicted of a felony? YES NO If yes, please explain:

Have you ever been evicted? YES NO Pets (Keeping of pets requires additional deposit & owner approval):
(Breed) (Age) (Weight) LBS.

Current address:

Own Rent (Please mark one) Monthly payment or rent: How long?

Current Landlord Contact: (Name) (Phone) ()

Previous address:

Own Rent (Please mark one) Monthly payment or rent: How long?

Previous Landlord Contact: (Name) (Phone) ()

Employment Information

Current employer: (Supervisor)

Position: Hourly Salary (Please mark one) Monthly income:

Employer address: How long?

Phone: () E-mail: Fax: ()

Previous employer: (Supervisor)

Position: Hourly Salary (Please mark one) Monthly income:

Employer address: How long?

Phone: () E-mail: Fax: ()

Emergency Contact

Name of a person not residing with you:

Full Address:

Phone: () Relationship:

Additional Information

Children Occupying: Name Age Name Age Name Age

Automobile YEAR MAKE MODEL COLOR TAG# **Automobile** YEAR MAKE MODEL COLOR TAG#
1st Car: **2nd Car:**

Applicant represents that all of the statements and representations are true and complete, and hereby, authorizes verification of the above information, references and credit records. Applicant understands that an investigative consumer report including information about character, credit history, general reputation, personal characteristics, mode of living, and all public record information including criminal records may be made. Applicant agrees that false, misleading or misrepresented information may result in the application being rejected, will void a lease/rental agreement if any and/or be grounds for immediate eviction with loss of all deposits and any other penalties as provided by the lease terms if any. Applicant authorizes verification of all information by the Landlord and or Management company. Applicant has the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

NON REFUNDABLE APPLICATION FEE--Applicant(s) has paid to Landlord and/or Management company here with the sum of **\$60.00** as a **NON REFUNDABLE APPLICATION FEE** for costs, expenses and fees in processing the application.

PROPERTY DEPOSIT AGREEMENT-- Applicant has deposited a **.PROPERTY DEPOSIT. of \$ rent plus \$100.00** in consideration for taking the dwelling off the market while the application is being processed. If applicant is approved by Landlord and/or Management and the lease is entered into and possession of the apartment is taken, **the .PROPERTY DEPOSIT. shall be applied toward the security/damage deposit.** If applicant is approved, but fails to enter into the lease within 3 days of verbal and/or written approval and/or take possession after lease signing, the **FULL .PROPERTY DEPOSIT.** shall be forfeited to the Landlord or Management in addition to any penalties as provided in the lease if the lease has been signed by the applicant. The **.PROPERTY DEPOSIT.** shall be refunded only if applicant is not approved. Keys will be furnished only after lease and other rental documents have been properly executed by all parties and only after applicable rentals and security deposits have been paid. This application is preliminary only, in no way implies that a particular rental unit shall be available and in no way obligates Landlord or Management to execute a lease or deliver possession of the proposed premises.

I HAVE READ AND AGREE TO THE PROVISIONS AS STATED

Applicant's Signature

Date

SECURITY DEPOSIT	\$ _____	OFFICE USE ONLY
PET SECURITY	\$ _____	COMMUNITY _____
PET FEE	\$ _____	APT. # _____
CREDIT CHECK FEE	\$ _____	RENT _____
PAID WITH APPLICATION	\$ _____	APT. TYPE _____
BALANCE OF DEPOSIT DUE	\$ _____	TERM OF LEASE _____
FIRST MONTH'S RENT	\$ _____	MOVE-IN DATE _____
TOTAL DUE BEFORE MOVE-IN	\$ _____	APS REPORT _____
RECEIVED BY: _____	DATE: _____	DATE ORDERED: _____
APPROVED BY: _____	DATE: _____	DATE RECEIVED: _____