

# RENTAL APPLICATION

<b>PERSONAL</b>	<b>Applicant's Name (Last, First)</b>		<b>Social Security Number</b>					<b>Date of Birth</b>			<b>Driver's License # &amp; State</b>		
	Spouse's full name												
	Additional Occupants:	1						3					
		2						4					

<b>RESIDENCE HISTORY</b>	<b>Current address (check one) :</b> <input type="checkbox"/> Own/Mortgage <input type="checkbox"/> Rent <input type="checkbox"/> Other - Details:															
	Address					City		State		Zip code		Move in date		Home Phone		
	Landlord/Community					Monthly Payment					Apt #		Move out date		Landlord Phone	
	<b>Previous address (check one) :</b> <input type="checkbox"/> Own/Mortgage <input type="checkbox"/> Rent <input type="checkbox"/> Other - Details:															
	Address					City		State		Zip code		Move in date		Home Phone		
	Landlord/Community					Monthly Payment					Apt #		Move out date		Landlord Phone	

<b>EMPLOYMENT HISTORY</b>	<b>Current Employer</b>		Address			City		State		Phone #		
	Supervisor's name		Supervisor's Phone #			Employment dates		Start:                      End:		Monthly income \$		
	<b>Previous Employer</b>		Address			City		State		Phone #		
	Supervisor's name		Supervisor's Phone #			Employment dates		Start:                      End:		Monthly income \$		
	<b>Co-Applicant</b>	Employer		Address			City		State		Phone #	
		Supervisor's name		Supervisor's Phone #			Employment dates		Start:                      End:		Monthly income \$	
	Additional income such as child support, alimony or separate maintenance need not be disclosed unless such additional income is to be induced for qualification.											
	Additional Income; Source: <span style="float: right;">Amount: <span style="float: right;">Per:</span></span>											

<b>AUTO</b>	Year, Make, Model			Color		License plate number		State	
	Year, Make, Model			Color		License plate number		State	

<b>CONTACT</b>	<b>In case of emergency; please provide us with the following information:</b>											
	Nearest relative			Address				Phone		Relationship		
	Emergency Contact			Address				Phone		Relationship		

<p><b>Miscellaneous:</b></p> <p>Have you ever been EVICTED from any residence?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Have you ever been convicted of a FELONY offense?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Does the applicant or any occupant listed above have any pending criminal charges?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Do you have any pets?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p>	<p style="text-align: center;"><b>For Office Use Only:</b></p> <p><b>Unit #</b> _____      <b>Term Of Lease</b> _____</p> <p><b>Rent \$</b> _____      <b>Move In Date</b> _____</p> <p><b>Security Deposit \$</b>      <b>Application Fee \$</b></p>
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Upon signing, the applicant(s) recognize that an investigative report may be prepared whereby information is obtained through interview, credit report, and criminal check. This includes information as to your character, general reputation, credit, and mode of living. This application may be declined as a result of any misrepresentation or insufficient information or as a result of an incomplete application. The applicant(s) appearing below hereby authorize the holder of the application to investigate the above mentioned, and authorizes the release of any and all requested information that the owner or agents deem necessary in determining the status of this application.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_      Signature of Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_      Leasing Agent \_\_\_\_\_ Date \_\_\_\_\_



This management office does not discriminate against any person based on race, color, religion, sexual orientation, national origin, familial status, or disability.