

RENTAL APPLICATION FORM

(Rev. 2/2017)

Application for Residential Lease

Each applicant age 18 or older must fill out an application or be listed as a co-applicant. Only completed applications will be accepted.

This application is considered complete when:

1. Turned in completed (no blanks) Please write neatly.
2. Copies of last two pay stub are provided. (If self-employed, copies of last two years' tax returns)
3. Copy of driver's license is provided.
4. Application fee of \$_____ paid in cash or certified funds

Address Applied for:		Requested Move in date:	Requested Lease Term:
_____		_____	From: _____ To: _____
Number of Bedrooms:	Number of Occupants:	Rent Amount:	Deposit Amount:
_____	_____	\$ _____	\$ _____

**Provide copy of Driver's License*

Applicant Information

Co-Applicant Information

Last Name	First Name	M. I.	Co-Applicant Last Name	First Name	M. I.
_____	_____	_____	_____	_____	_____
Date of Birth	Social Security Number		Date of Birth	Social Security Number	
_____	_____		_____	_____	
Contact Phone Number	Work Phone Number		Contact Phone Number	Work Phone Number	
_____	_____		_____	_____	
Email Address			Email Address		
_____			_____		
Current Address:			Current Address:		
_____			_____		
City	State	Zip	City	State	Zip
_____	_____	_____	_____	_____	_____
Previous Address:			Previous Address:		
_____			_____		
City	State	Zip	City	State	Zip
_____	_____	_____	_____	_____	_____
DLN/State ID:			DLN/State ID:		
_____			_____		
Auto Make: _____ Model: _____			Auto Make: _____ Model: _____		
Color: _____ Year: _____ Lic#: _____			Color: _____ Year: _____ Lic#: _____		

Rental Information

<u>Applicant Information</u>		<u>Co-Applicant Information</u>	
Present Landlord Name		Present Landlord Name	
_____		_____	
Present Landlord Phone Number		Present Landlord Phone Number	
_____		_____	
Reason for Leaving:		Reason for Leaving:	
_____		_____	
Length of Rental	Rent Amount	Length of Rental	Rent Amount
_____	_____	_____	_____
Previous Landlord	Phone Number	Previous Landlord	Phone Number
_____	_____	_____	_____
Length of Rental	Rent Amount	Length of Rental	Rent Amount
_____	_____	_____	_____

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Emergency Contact

Applicant Information		Co-Applicant Information	
Name:	Phone number:	Name:	Phone number:
Relationship:		Relationship:	
Doctor:	Phone number:	Doctor:	Phone number

** Must provide copies of last two pay stubs*

Employment Information

Applicant Information		Co-Applicant Information	
Present Employer:		Present Employer:	
Supervisor Name:		Supervisor Name:	
Address:		Address:	
Phone number:		Phone number:	
How Long?	Occupation:	How Long?	Occupation:
Salary:	CIRCLE ONE:	Salary:	CIRCLE ONE:
\$	Per: Week Month Year	\$	Per: Week Month Year
If you have been employed for less than 6 months with current employer, or are employed by more than one company, please complete next section:			
Employer		Employer:	
Supervisor Name:		Supervisor Name:	
Address:		Address:	
Phone Number:		Phone Number:	
How Long?	Occupation:	How Long?	Occupation:
Salary:	CIRCLE ONE:	Salary:	CIRCLE ONE:
\$	Per: Week Month Year	\$	Per: Week Month Year
Likelihood of Continued Employment:		Likelihood of Continued Employment:	
Other Income: Source: _____		Other Income: Source: _____	
CIRCLE ONE:		CIRCLE ONE:	
Amount: _____ Per: Week Month		Amount: _____ Per: Week Month	
Other Income: Source: _____		Other Income: Source: _____	
CIRCLE ONE:		CIRCLE ONE:	
Amount: _____ Per: Week Month		Amount: _____ Per: Week Month	

References

Name of Nearest Relative	Relationship:	Phone Number:	Address:
Personal Reference	Relationship:	Phone Number:	Address:
Personal Reference	Relationship:	Phone Number:	Address:

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Has applicant, Spouse, or any other occupant ever:

- (1) Filed for Bankruptcy or reorganization of credit? Y / N
- (2) Had an eviction filed against you or been evicted? Y / N If Yes How Many: _____
- (3) Been asked to vacate an apartment or house? Y/N If Yes How Many Times: _____
- (4) Currently Under an eviction with present landlord? Y / N
- (5) Refused to pay rent when it was due? Y / N
- (6) Paid rent late or when it was past due? Y / N If Yes How Many Times: _____
- (7) Have a criminal record? Y / N
- (8) Have any pets? Y / N If Yes How Many: _____ What Breed(s): _____
- (9) Have you ever had bed bugs/bugs? Y / N If Yes, When (MM/YY): _____
- (10) Do you or anyone in your household smoke? Y / N

If you marked yes above, please explain fully (Use additional page as necessary):

Other Occupants: List all persons who will occupy this unit other than you (If Occupants are over the age of 18 they must also complete application and/or be listed as a co-applicant)

Name _____ Age _____ Relationship _____
 S.S. # _____

Name _____ Age _____ Relationship _____
 S.S. # _____

Name _____ Age _____ Relationship _____
 S.S. # _____

Name _____ Age _____ Relationship _____
 S.S. # _____

Applicant Signature(s) for Consent to release information.

Please read carefully before signing.

By signing below, I/ We represent to you that I have read this entire application and that all the above information in the application is true, correct, and complete; I/We hereby authorize _____ their agents and/or partners to investigate and make any inquiries necessary to evaluate my tenancy by obtaining and verifying information on any reports on me/us and are maintained by but not limited to: City/ County/ State/ Federal Law Enforcement Agencies (including public and criminal records), present/ past employers (including salary verifications), present/ past landlords and Consumer Credit Reporting Agencies or any other source deemed necessary, now or in the future. I/ We understand that any information obtained may be considered by the landlord in their sole discretion, as a factor in decisions they make in respect to the real property for which I am applying to rent. I/ We agree if accepted, to execute a Standard Form Lease in a timely manner, and fulfill all the terms of the lease, including payment of the security deposit and first month's rent. All applicants over the age of 18 years must sign the lease. Applicant agrees only those listed on the lease, except for children born during the term of the lease, shall occupy the premises.

Furthermore, I hereby release and hold harmless all agents, owners, affiliates, officers, directors, employees, credit reporting agencies, present / past employers, present/past landlords, all officers and employees that shall provide information to the landlord, upon request, from any and all claims, demands, suits, or expenses arising from or related to content, validity, or handling of said reports.

Any discrepancies, falsified or lack of information will result in immediate rejection of this application and forfeiture of all application fees. I/ We understand that this is an application and does not constitute a lease agreement in whole or part. I/ We hereby acknowledge non-refundable application fee of \$ _____ PER APPLICANT OVER THE AGE OF 18 YEARS to be used in the processing of this application. I agree that I will forfeit my application fee(s) if I withdraw this application. I understand that this application will not be processed until the application fee has been paid in full.

Applicant: _____ Date _____

Co-Applicant: _____ Date _____

Remarks: _____

Rental amount \$ _____ Deposit Paid \$ _____ Approved by: _____ Date: _____