

RENTAL APPLICATION INFORMATION

Please let us know how you heard of us:

___Newspaper ___Referral ___Internet ___Signage ___Other: _____

PERSONAL INFORMATION:

Applicant's Full Name: _____

Have you ever used another name(s)? Yes / No If yes, name(s) _____

Driver's License #: _____ **State** _____ **Date of Birth:** _____

Social Security Number: _____ - _____ - _____

Primary Phone #: __ (____) _____ - _____ **Type:** Home Cell Work Other

Secondary Phone #: __ (____) _____ - _____ **Type:** Home Cell Work Other

E-mail Address: _____

List any other persons who will reside with you below:

NAME AGE RELATIONSHIP

NAME AGE RELATIONSHIP

NAME AGE RELATIONSHIP

Do you have pets? Yes / No If yes, how many? _____ What type(s)? _____

Breed(s)? _____ Gender(s) _____

Age(s)? _____ Weight(s)? _____ Animal License #: _____

Do you, or any of the people who will be residing in this unit smoke? Yes / No

Do you have any special needs or requirements that we need to be aware of? Yes / No

If yes, please be specific: _____

Name of nearest living relative: _____

Phone: _____ Relationship _____

Who should we contact in case of emergency? _____

Phone: _____ Relationship: _____

Initial _____

RESIDENCE HISTORY:

Current Address: _____

City: _____ State: _____ Zip: _____

How long at this address? From: _____ To: _____ Rent/Mrtg. Amount: \$ _____

Current Landlord or mortgage holder: _____ Telephone: _____

Reason for moving: _____

Is your lease expired? Y / N If not, when is your lease expiration date? _____

Previous Address #1: _____

City: _____ State: _____ Zip: _____

How long at this address? From: _____ To: _____ Rent/Mort. Amount: \$ _____

Previous Landlord or Mortgage Holder: _____ Telephone: _____

Reason for moving: _____

Previous Address #2: _____

City: _____ State: _____ Zip: _____

How long at this address? From: _____ To: _____ Rent/Mort. Amount: \$ _____

Previous Landlord or Mortgage Holder: _____ Telephone: _____

Reason for moving: _____

Have you ever been the subject of an eviction proceeding or settlement whether or not a suit was actually filed? Yes / No

If yes, please explain, including dates, rental premises address, and contact information for property owner and property manager:

Initial _____

CRIMINAL HISTORY:

1. Have you or any other intended occupant, including minors, ever been charged (whether or not resulting in a conviction) or convicted, or pleaded guilty or “no contest” to a felony? Yes / No
2. Have you or any other intended occupant, including minors, ever been convicted of or pleaded guilty or “no contest” to a misdemeanor involving sexual misconduct or the manufacturing of drugs whether or not resulting in a conviction? Yes / No
3. Are you or any other intended occupant, including minors, required to register as a Violent or Sex Offender in any jurisdiction? Yes / No

EMPLOYMENT INFORMATION (Current and Most Recent):

Employer #1: _____ Start Date _____ End Date _____

Employers Address: _____ Telephone: _____

Position: _____ Monthly Income: _____ Supervisor: _____

Employer #2: _____ Start Date _____ End Date _____

Employers Address: _____ Telephone: _____

Position: _____ Monthly Income: _____ Supervisor: _____

Reason for Leaving (if applicable): _____

Employer #3: _____ Start Date _____ End Date _____

Employers Address: _____ Telephone: _____

Position: _____ Monthly Income: _____ Supervisor: _____

Reason for Leaving (if applicable): _____

Other sources of income (include financial aid, social security, loans, mutual funds, stocks, bonds, family assistance, etc.)

1) _____ \$ _____ / Mo

2) _____ \$ _____ / Mo

3) _____ \$ _____ / Mo

4) _____ \$ _____ / Mo

Initial _____

BANKING & CREDIT INFORMATION:

Bank: _____ Phone: _____

Checking Acct # _____ Savings Acct # _____

Have you ever filed bankruptcy? Yes / No If yes, please explain: _____

Are there any judgments against you? Yes / No If yes, please explain: _____

List financial obligations (include student loans, credit cards, auto or home loans, child support, etc.)

1) _____ \$ _____ / Mo

2) _____ \$ _____ / Mo

3) _____ \$ _____ / Mo

4) _____ \$ _____ / Mo

5) _____ \$ _____ / Mo

AUTOMOBILE INFORMATION:

Please provide a copy of registration for each vehicle

Make: _____ Model: _____ VIN # _____

Year: _____ Color: _____ Plate State: _____ Plate #: _____

Make: _____ Model: _____ VIN # _____

Year: _____ Color: _____ Plate State: _____ Plate #: _____

REFERENCES:

List personal references not already listed on application (teachers, advisors, businesses, etc)

1) Name _____ Relation _____ Phone _____

2) Name _____ Relation _____ Phone _____

3) Name _____ Relation _____ Phone _____

Applicant Signature: _____ **Date:** _____