

# Rental Application for \_\_\_\_\_ This is a nonsmoking property

Applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
<b>Current address:</b>		Reason for Moving:	
City:	State/Zip:	Drivers License #:	
Own    Rent    (Check One)	Monthly payment or rent:	How long?	
<b>Previous address:</b>		Reason for Moving:	
City:	State/Zip:		
Owned    Rented    (Check One)	Monthly payment or rent:	How long?	
Have you ever been evicted from a rental? Yes    No	Are there any judgments against you? Y or N Yes    No	Why?	
Employment or Source of Income Information			
<b>Current employer/income Source:</b>			How long?
Employer address:			Phone:
E-mail:	City:	State/Zip:	
Position:	Hrly    Salary    (Check One)	Annual income:	
<b>Previous employer:</b>	How long?	Annual income:	
<b>Other Income Source:</b>	How long?	Annual income:	
Emergency Contact			
Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			
Co-applicant Information			
Name:			
Date of birth:	SSN:	Phone:	
<b>Current address:</b>		Reason for Moving:	
City:	State/Zip:	Drivers License #:	
Own    Rent (Check One)	Monthly payment or rent:	How long?	
<b>Previous address:</b>		Reason for Moving:	
Have you ever been evicted from a rental?    Y    N	Are there judgements you?    Y    or    N	Why?	
Co-applicant Employment			
<b>Current employer:</b>			
Employer address:			
Phone:			E-mail:
City:	State:	ZIP Code:	
Position:	Hourly    Salary (Check One)	Annual income:	
Misc. (must be completed)			
Pets, breed, age size:	Name/Ages of all occupants, use addtl sheet if needed:	Vehicle/Make/Model/Color	
<b>I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.</b>			
Signature of applicant:			Date:
Signature of co-applicant:			Date:

Does your application require the landlord to accept section 8?