



785-691-8346

RENTAL APPLICATION - Application is hereby made to rent premises

Date _____ Address _____

Term _____ Ending Date _____

Monthly Rent _____ Deposit _____

A deposit of N/A is made herewith on account of the first month's rent, with the understanding that if this application is accepted and the applicant fails to execute a lease before the beginning date specified above, or to pay the balance due as first month's rent, said payment will be forfeited as liquidated damages. It is also understood that if this application is not accepted or if the premises are not ready for occupancy by the applicant on the date specified above, said deposit shall be refunded to the applicant forthwith, upon applicant's request.

APPLICANT

Name _____ SS # _____

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

Present Address _____ How Long _____

Contact Information for Present Address Landlord _____

Previous Address _____ How Long _____

Contact Information for Previous Address Landlord _____

Married? _____

Children? _____ How Many _____ Ages _____

Pets? _____ How Many _____ What Kind _____

YOUR EMPLOYMENT

Employer _____ How Long on Present Job _____

Employer Address _____

Supervisor _____

Bus. Phone _____ Annual Income _____

SPOUSE'S INFORMATION

Name _____ SS# _____

Drivers License # _____ State _____ Date of Birth _____

SPOUSE'S EMPLOYMENT

Employer _____ How Long on Present Job _____

Employer Address _____

Supervisor _____

Bus. Phone _____ Annual Income _____

REFERENCES

Bank _____ Phone _____

Personal Reference _____ Phone _____

Credit Reference _____ Phone _____

Credit Reference _____ Phone _____

The information provided herein may be used by the landlord or his agent to determine whether to accept this application. Upon written request within 3 working days, the landlord or his agent will disclose to applicant in writing the nature and scope of any investigation landlord has requested, and will, if this application is refused, state in writing the reason for said refusal.

Please sign here to authorize us to check your references.

Print Name _____ Best Number To Reach You _____

Signature _____ Other Number To Reach You _____

Application Fee _____ (Cash Only) Email _____

Accepted _____ Refused _____ Email _____

Return completed application with application fee (Cash Only or pay on website – This fee refunded upon signing lease. See website for current pricing) to:

Steve Kincaid
1701 Troon Ln
Lawrence, KS 66047-1917
(785)691-8346