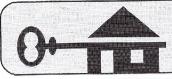


RENTAL APPLICATION

Every occupant over the age of 18 MUST fill out a separate application (even if married). Please fill out this form COMPLETELY and sign where indicated.

PERSONAL INFORMATION										
FIRST NAME	MIDDLE				LAST			S.S.#		
DATE OF BIRTH	/	MARITAL STAT	TUS 🔲 SINGLE	MARRIED Sind	:e	DIVORCED S	ince	DRIVERS LICENSE #	STATE	
PHONE		CELL HOM	DHONE		EXT.		OME 🔲 WORK	EMAIL		
PRESENT HOME ADDRESS	=				CITY/STATE/ZI	Р		<u> </u>		
LENGTH OF TIME			PRESENT LA	NDLORD				LANDLORD PHONE		
REASON FOR LEAVING			AMOUNT C			RENT		Is your present rent up to date?		
PREVIOUS HOME ADDRESS					CITY/STATE/ZI	P				
LENGTH OF TIME			PREVIOUS L	ANDLORD				LANDLORD PHONE		
REASON FOR LEAVING					AMOUNT OF RENT			Was your rent up to date?		
NEXT PREVIOUS HOME ADDRES	S				CITY/STATE/ZI	Р				
LENGTH OF TIME	ENGTH OF TIME			OUS LANDLORD				LANDLORD PHONE		
REASON FOR LEAVING	REASON FOR LEAVING				AMOUNT OF RENT			Was your rent up to date?		
DDODOSED O	CCTIBAN	J/T/6)			J.					
NAME	PROPOSED OCCUPANT(S)				OCCUPATION				AGE	
NAME	v.				H es ward and the same of the	OCCUPATION			AGE	
NAME						OCCUPATION			AGE	
NAME		RELA	TIONSHIP			OCCUPATION			AGE	
NAME		RELA	TIONSHIP			OCCUPATION	1		AGE	
PROPOSED PI	EII(S)		/BREED						AGE	
NAME			/BREED		6	INDOOR	OUTDOO	PR	AGE	
			/BREED			INDOOR	OUTDOC	PR	AGE	
NAME		I I I F C	/ BREED			INDOOR	OUTDOO	PR	AGE	
VEHICLE(S) IN	_	ATION								
YEAR	MAKE		MODEL				PLATE #	STATI		
YEAR	MAKE		MODEL		COLOR		PLATE #	STATI	Ē	
EMPLOYMEN'	7									
CURRENT EMPLOYER				OCCUPATION				HOURS/WE	EK	
SUPERVISOR			PHONE	_	_	EXT:	YEARS EMP	LOYED		
ADDRESS			***************************************	CITY/STATE/ZIP		#500 933 \$2	1			
CURRENT EMPLOYER				OCCUPATION	IPATION			HOURS/WEEK		
SUPERVISOR				PHONE	EXT:			YEARS EMPLOYED		
ADDRESS				CITY/STATE/ZIP	2					
				1						
INCOME				SOURCE				PROOF OF I	NCOME	
	EEKLY 🔲 BIWEER	KLY 🔲 MONTH	ILY 🔲 YEARLY	SOURCE		77,		PROOF OF IT	NCOME AFE	
INCOME \$ WEEKLY BIWEEKLY MONTHLY YEARLY									I VES I IN	
CURRENT S WE	SOURCE				PROOF OF II	NCOME YES NO				



RENTAL APPLICATION

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CREDIT CARD / FINANCIAL I				CDEDITOR'S	and the second			
CAR LOAN LIEN HOLDER	BALANCE OWED	DWED PAYMENT			CREDITOR'S			
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #	-	_			
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #					
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT			CREDITOR'S PHONE #			
CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE MONTHLY OWED PAYMENT			CREDITOR'S				
BANK ACCOUNT NAME OF BANK	BALANCE	ICE MONTHLY PAYMENT			ACCOUNT NUMBER			
EMERGENCY / PERSONAL RE	EERENCE INFORMA	TION						
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE	_	_	П номе	work	
RELATION	ADDRESS	G care G nome	CITY/STATE/ZI	Р				
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE		_	□ номе	☐ WORK	
RELATION	ADDRESS	G CELL I HOME	CITY/STATE/ZI	P	and the second second			
PERSONAL REFERENCE	PHONE		PHONE			П НОМЕ	DI WORK	
	ADDRESS	CELL HOME	CITY/STATE/ZI	IP		HOME	_ WORK	
RELATION	PHONE		PHONE			☐ HOME	DLWORK	
PERSONAL REFERENCE	ADDRESS	CELL HOME	CITY/STATE/Z	IP		_ HOME	U WORK	
RELATION	AUDRESS							
APPLICANT QUESTIONNAIR	E / AUTHORIZATIO	N						
Has applicant ever been sued for bills?			he sheriff?	YES	☐ NO			
Has applicant ever been bankrupt?	O Has applicant ever been brought to	Has applicant ever been brought to court by another landlord?						
Has applicant ever been guilty of a felony? YES N	O Has applicant ever moved owing re	Has applicant ever moved owing rent or damaged an apartment?						
Has applicant ever broken a Lease?	O Is the total move-in amount availal	Is the total move-in amount available now (rent and deposit)?						
		reading maighbors and a	w other course	es deemed	necessary to	n investigate	applicant.	
Applicant authorizes the landlord to contact past and presen All information is true, accurate and complete to the best o	t landlords, employers, creditors, credit but f applicant's knowledge. Landlord reserve	es the right to disqualify	tenant if infor	mation is n	ot as repres	sented.		
ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFOR	MATION ABOUT THE UNDERSIGNED UPO	ON PRESENTATION OF T	HIS FORM OR	а рнотос	OPY OF THI	S FORM AT A	NY TIME.	
XAPPLICANT SIGNATURE		***************************************	anna					
If you have any questions abou	t the interpretation or legality of this form	n, please consult an atto	orney or other	qualified p	erson.			
	, -							
NOTES:			21.000000					
			2200					