

LEASE APPLICATION

NAME (S)		SS#	
STREET			
CITY	STATE	ZIP	
PHONE	DATE OF F	BIRTH	
EMAIL ADDRESS			
ARE YOU INTERESTED IN:	(Please ch	neck)	
1 BEDROOM	2 BEDROOM		
FIRST AVAILABLE			
EVALUATE YOUR PRESENT	HEALTH: (Please ch	neck)	
EXCELLENTGO	ODFAIRPOC	OR	
WOULD THERE BE ANOTHER	R PERSON LIVING WITH	YOU?	
NAME	I	RELATIONSHIP	
HOW DID YOU HEAR ABOUT	GOLDEN LANE APARTN	MENTS: (Please check)	
NEWSPAPER W	'EBSITE SIGN	ANOTHER PERSON	
TENANTS AGREE TO THE FOLL	OWING:		
1) APPLICATION DEPO	SIT OF \$500.00 IS ENCLOSE	ED	
Make check payable to '	GOLDEN LANE APARTME	ENTS, INC.", send to 1177 Lawrence Rd,	
Harrod, Ohio, 45850.	CERTAIN APPLICATION RE	ESTRICTIONS APPLY.	
	-	ashed while out of doors), add \$500.00 to deposit	
nonrefundable (due upo			
-,	WED IN ANY APARTMENT		
,		AGED TO VISIT BUT LIMITED TO 30	
OVERNIGHT STAYS 5) ANY ADDITIONAL P		THER THAN THOSE LISTED ABOVE WILL I	DE
CHARGED \$100.00 PE		THEN THAN THOSE LISTED ABOVE WILL I	DE
		LE, INCREASES IN RENT TO BE NO MORE T	ΓΗΑΝ
,		ER FEATURES OF THE LEASE AGREEMENT	
			-

Your signed application authorizes Golden Lane to run a credit check at no charge to you.

DATE_____

SIGNED_____