

# Rental Application

Please bring the completed application with you when viewing the apartment.

Address Applying for \_\_\_\_\_ Desired Move-In Date \_\_\_\_\_

**Important Note to Applicants** Please fill this application out in full. Incomplete applications will not be processed.

## Personal Information *Please do not leave any blanks in this section.*

First Name \_\_\_\_\_ MI. \_\_\_\_\_ Last Name \_\_\_\_\_

Email Address \_\_\_\_\_ Driver's License # \_\_\_\_\_

Phone Number \_\_\_\_\_ Alternate Phone \_\_\_\_\_

People over the age of 18 who will be living with you:

1 \_\_\_\_\_ 2 \_\_\_\_\_

3 \_\_\_\_\_ 4 \_\_\_\_\_

**\*\* Everyone 18 years old or older must complete a tenant screening process. No exceptions.**

## APPLICANT #1

**Employment Information** *Please include all sources of income. Income must be verifiable using pay subs, disability/SS forms. Use additional paper if needed. Self-employed: Please supply tax returns for previous two years and two most recent banks statements.*

Current Employer \_\_\_\_\_ Position \_\_\_\_\_

Employer Phone Number \_\_\_\_\_ Supervisor Name \_\_\_\_\_

Gross Wages Per Month \_\_\_\_\_ Hire Date \_\_\_\_\_

Other Sources of Income \_\_\_\_\_ Amount Per Month \_\_\_\_\_

Explain \_\_\_\_\_

**Rental History** *Please include all addresses you have lived at for the previous 5 years. Use additional paper if needed.*

**Current Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Move-in Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_ Landlord's Phone \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_

Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_

Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Questionnaire** *Please answer all these questions truthfully.*

How long will you live here? \_\_\_\_\_ What pets do you have? \_\_\_\_\_

How many evictions have been filed upon you? \_\_\_\_\_ How many felonies do you have? \_\_\_\_\_

Have you ever broken a lease? \_\_\_\_\_ Do You Smoke? \_\_\_\_\_ How many vehicles do you own? \_\_\_\_\_

Is the total move-in amount available now? \_\_\_\_\_ When would you like to move in? \_\_\_\_\_

How did you hear about this home? \_\_\_\_\_

For what reasons could you not pay rent on time? \_\_\_\_\_

Do you have a checking account? \_\_\_\_\_ Balance: \_\_\_\_\_

Do you have a savings account? \_\_\_\_\_ Balance: \_\_\_\_\_

Emergency Contact -Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

(Including to contact regarding rent or tenancy.)

**Additional Information** Please use this optional space for additional information, comments, or explanations.

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Please read carefully and sign and date below if you agree. Applicant certifies that the information contained in this application is true and correct. Applicant understands that false or misleading information is grounds for immediate disqualification.

### Authorization

Applicant authorizes the Landlord or Landlord's representatives to make any inquires deemed necessary to verify Applicant is the most qualified based on the below stated qualification standards. This verification includes, but is not limited to, direct contact with Applicant's employers, current landlord, previous landlords, friends, personal and professional references, law enforcement agencies, government agencies, consumer reporting agencies, public records, eviction records, and any other sources of information which the Landlord or Landlord's representative may deem necessary. Applicant verifies that the Landlord and Landlord's representatives shall not be held liable for damages of any kind that result from the verification of the information provided. This authorization shall extend through Applicant's tenancy to ensure continued compliance to the terms of tenancy or to recover any financial obligations relating to Applicant's tenancy, and beyond the expiration of Applicant's tenancy for recovery of any financial obligations, or for any other acceptable purpose. Should the Applicant be denied or face other adverse action based on information received in a consumer report, the Applicant has a right to obtain a free copy of the consumer report, and to dispute the accuracy of the information it contains by contacting the Consumer Reporting Agency.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Important Note to Applicants** Please fill this application out in full. Incomplete applications will not be processed.

## APPLICANT #2

### Personal Information *Please do not leave any blanks in this section.*

First Name \_\_\_\_\_ MI. \_\_\_\_\_ Last Name \_\_\_\_\_  
Email Address \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Phone Number \_\_\_\_\_ Alternate Phone \_\_\_\_\_

### Employment Information *Please include all sources of income. Income must be verifiable using pay subs, disability/SS forms. Use additional paper if needed. Self-employed: Please supply tax returns for previous two years and two most recent banks statements.*

Current Employer \_\_\_\_\_ Position \_\_\_\_\_  
Employer Phone Number \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
Gross Wages Per Month \_\_\_\_\_ Hire Date \_\_\_\_\_  
Other Sources of Income \_\_\_\_\_ Amount Per Month \_\_\_\_\_  
Explain \_\_\_\_\_

### Rental History *Please include all addresses you have lived at for the previous 5 years. Use additional paper if needed if the information is the same as applicant#1 - write same as #1*

**Current Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_ Landlord's Phone \_\_\_\_\_  
Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_  
Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_  
Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

### Questionnaire *Please answer all these questions truthfully.*

How long will you live here? \_\_\_\_\_ What pets do you have? \_\_\_\_\_  
How many evictions have been filed upon you? \_\_\_\_\_ How many felonies do you have? \_\_\_\_\_  
Have you ever broken a lease? \_\_\_\_\_ Do You Smoke? \_\_\_\_\_ How many vehicles do you own? \_\_\_\_\_  
Is the total move-in amount available now? \_\_\_\_\_ When would you like to move in? \_\_\_\_\_

How did you hear about this home? \_\_\_\_\_  
For what reasons could you not pay rent on time? \_\_\_\_\_  
Do you have a checking account? \_\_\_\_\_ Balance: \_\_\_\_\_  
Do you have a savings account? \_\_\_\_\_ Balance: \_\_\_\_\_

Emergency Contact -Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_  
(Including to contact regarding rent or tenancy.)

**Additional Information** Please use this optional space for additional information, comments, or explanations.

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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Important Note to Applicants** Please fill this application out in full. Incomplete applications will not be processed.

### APPLICANT #3

#### Personal Information *Please do not leave any blanks in this section.*

First Name \_\_\_\_\_ MI. \_\_\_\_\_ Last Name \_\_\_\_\_  
Email Address \_\_\_\_\_ Driver's License # \_\_\_\_\_  
Phone Number \_\_\_\_\_ Alternate Phone \_\_\_\_\_

#### Employment Information *Please include all sources of income. Income must be verifiable using pay subs, disability/SS forms. Use additional paper if needed. Self-employed: Please supply tax returns for previous two years and two most recent banks statements.*

Current Employer \_\_\_\_\_ Position \_\_\_\_\_  
Employer Phone Number \_\_\_\_\_ Supervisor Name \_\_\_\_\_  
Gross Wages Per Month \_\_\_\_\_ Hire Date \_\_\_\_\_  
Other Sources of Income \_\_\_\_\_ Amount Per Month \_\_\_\_\_  
Explain \_\_\_\_\_

#### Rental History *Please include all addresses you have lived at for the previous 5 years. Use additional paper if needed. if the information is the same as applicant#1 - write same as #1*

**Current Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_ Landlord's Phone \_\_\_\_\_  
Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_  
Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

**Previous Address** \_\_\_\_\_ City, State, Zip \_\_\_\_\_  
Move-in Date \_\_\_\_\_ Move-out Date \_\_\_\_\_ Landlord's Name \_\_\_\_\_  
Landlord's Phone \_\_\_\_\_ Monthly Rent \_\_\_\_\_ Reason for Moving \_\_\_\_\_

#### Questionnaire *Please answer all these questions truthfully.*

How long will you live here? \_\_\_\_\_ What pets do you have? \_\_\_\_\_  
How many evictions have been filed upon you? \_\_\_\_\_ How many felonies do you have? \_\_\_\_\_  
Have you ever broken a lease? \_\_\_\_\_ Do You Smoke? \_\_\_\_\_ How many vehicles do you own? \_\_\_\_\_  
Is the total move-in amount available now? \_\_\_\_\_ When would you like to move in? \_\_\_\_\_

How did you hear about this home? \_\_\_\_\_  
For what reasons could you not pay rent on time? \_\_\_\_\_  
Do you have a checking account? \_\_\_\_\_ Balance: \_\_\_\_\_  
Do you have a savings account? \_\_\_\_\_ Balance: \_\_\_\_\_

Emergency Contact -Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_  
(Including to contact regarding rent or tenancy.)

Why should we rent to you? \_\_\_\_\_

**Additional Information** Please use this optional space for additional information, comments, or explanations.

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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_