## **Rental Application**

•	l application with you when vie	ewing the apartmentDesired Move-In Date
Important Note to Applicate processed.	<b>nts</b> Please fill this application o	out in full. Incomplete applications will not be
Personal Information	Please do not leave any blanks in thi	is section.
First Name	MI. La	st Name
		Driver's License #
Phone Number	Alternate	Phone
People over the age of 18 v		
1		
3	4	
. ,		ncome. Income must be verifiable using pay subs, ase 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		
Current Address	City, Sta	or the previous 5 years. Use additional paper if needed. ate, Zip
		Landlord's Phone
Monthly Rent	Reason for Moving	
Previous Address	City, S	tate, Zip
Move-in Date	Move-out Date	Landlord's Name
Landlord's Phone	Monthly Rent	Reason for Moving
Previous Address	City, S	tate, Zip
Move-in Date	Move-out Date	Landlord's Name
Landlord's Phone	Monthly Rent	Reason for Moving
How long will you live here		you have?
		How many felonies do you have?
		How many vehicles do you own?
Is the total move-in amoun	t available now? When v	would you like to move in?

How did you hear about this home?			
-or what reasons could you not pay ren Do you have a checking account?	t on time?		
Do you have a savings account?			
Emergency Contact -Name Phone			
Relationship Including to contact regarding rent or tenancy.)			
Additional Information Please us explanations.	se this optional space for additional information, comments, or		
Please read carefully and sign and date	below if you agree. Applicant certifies that the information correct. Applicant understands that false or misleading isqualification.		
Authorization			
Applicant authorizes the Landlord or La to verify Applicant is the most qualified verification includes, but is not limited to previous landlords, friends, personal and government agencies, consumer report sources of information which the Landlord and Landlord's that result from the verification of the included applicant's tenancy to ensure continued obligations relating to Applicant's tenance covery of any financial obligations, or denied or face other adverse action bas	based on the below stated qualification standards. This to, direct contact with Applicant's employers, current landlord, and professional references, law enforcement agencies, sing agencies, public records, eviction records, and any other ord or Landlord's representative may deem necessary. Applicant is representatives shall not be held liable for damages of any kind information provided. This authorization shall extend through discompliance to the terms of tenancy or to recover any financial necy, and beyond the expiration of Applicant's tenancy for for any other acceptable purpose. Should the Applicant be seed on information received in a consumer report, the Applicant consumer report, and to dispute the accuracy of the information 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 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.)		
<b>Additional Information</b> Please use this optional space for additional information, comments, or explanations.		
Please read carefully and sign and date below if you agree. Applicant certifies that the i contained in this application is true and correct. Applicant understands that false or mi information is grounds for immediate disqualification.		
Applicant authorizes the Landlord or Landlord's representatives to make any inquires d to verify Applicant is the most qualified based on the below stated qualification standar verification includes, but is not limited to, direct contact with Applicant's employers, cu previous landlords, friends, personal and professional references, law enforcement age government agencies, consumer reporting agencies, public records, eviction records, as sources of information which the Landlord or Landlord's representative may deem necessary verifies that the Landlord and Landlord's representatives shall not be held liable for dar that result from the verification of the information provided. This authorization shall examplicant's tenancy to ensure continued compliance to the terms of tenancy or to record obligations relating to Applicant's tenancy, and beyond the expiration of Applicant's tenecovery of any financial obligations, or for any other acceptable purpose. Should the Adenied or face other adverse action based on information received in a consumer report has a right to obtain a free copy of the consumer report, and to dispute the accuracy of it contains by contacting the Consumer Reporting Agency.	rds. This rrent landlord, ncies, nd any other essary. Applicant nages of any kind tend through ver any financial nancy for applicant be rt, the Applicant	
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. \_ Position \_\_\_\_\_ Current Employer Employer Phone Number \_\_\_\_\_ Supervisor Name \_\_\_\_\_ Gross Wages Per Month \_\_\_\_\_ Hire Date \_\_\_\_\_ \_\_\_\_\_ Amount Per Month \_\_\_\_\_ Other Sources of Income **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 op explanations.	tional space for additional information, comments, or
Please read carefully and sign and date below if contained in this application is true and correct. information is grounds for immediate disqualific	• •
to verify Applicant is the most qualified based or verification includes, but is not limited to, direct previous landlords, friends, personal and profess government agencies, consumer reporting agencies of information which the Landlord or La verifies that the Landlord and Landlord's representative that result from the verification of the information Applicant's tenancy to ensure continued complications relating to Applicant's tenancy, and be recovery of any financial obligations, or for any of denied or face other adverse action based on information of the	contact with Applicant's employers, current landlord, sional references, law enforcement agencies, cies, public records, eviction records, and any other indlord's representative may deem necessary. Applicant entatives shall not be held liable for damages of any kind on provided. This authorization shall extend through ance to the terms of tenancy or to recover any financial beyond the expiration of Applicant's tenancy for other acceptable purpose. Should the Applicant be formation received in a consumer report, the Applicant or report, and to dispute the accuracy of the information
Signature:	Date: