

\$35 Application Fee Per Adult!

Community _____	AGENT: Apt. # _____	Rate _____
Today's Date _____	Date Required _____	Amount Paid _____

PERSONAL	Applicant's Name _____	Date of Birth _____
	Social Security No. _____	Married <input type="checkbox"/> Single <input type="checkbox"/> Phone(____) _____
	Co-Applicant's Name _____	Date of Birth _____
	Social Security No. _____	Current XXX Phone (____) _____
	Names, ages and relationship of anyone else who will occupy the apartment: _____	

RESIDENCE	Current Address _____
	No. _____ Street _____ City _____ State _____ Zip Code _____
	() Rent () Own () Live with family or friend () Other _____ Dates: From _____ To _____
	Apartment or Landlord's Name: _____ Amount: _____
	Apartment or Landlord's Phone: _____ Name _____ City _____ State _____ Reason for Moving _____
	Former Address _____
No. _____ Street _____ City _____ State _____ Zip Code _____	
() Rent () Own () Live with family or friend () Other _____ Dates: From _____ To _____	
Apartment or Landlord's Name: _____ Amount: _____	
Apartment or Landlord's Phone: _____ Reason for Moving _____	

EMPLOYMENT	Applicant's Employer _____	Supervisor _____
	Employer's Address/Location _____	Phone# (____) _____
	Position Held _____	Date of Hire _____ Salary \$ _____ Per _____
	Previous Employer _____	Supervisor _____
	Employer's Address/Location _____	Phone# (____) _____
	Position Held _____	Date of Hire _____ Salary \$ _____ Per _____
	Co-Applicant's Employer _____	Supervisor _____
	Employer's Address/Location _____	Phone# (____) _____
Position Held _____	Date of Hire _____ Salary \$ _____ Per _____	

GENERAL INFORMATION	<u>STOP!!! DID YOU COMPLETE THE RESIDENCE HISTORY? YES NO EMPLOYMENT HISTORY YES NO</u>	
	IF YOU ANSWERED NO, WE CANNOT PROCESS YOUR APPLICATION	
	Bank Name/Location _____	Phone# (____) _____
	Savings Acct. _____	Regular Checking _____
	Pets(s) _____	Type(s) _____ Weight(s) _____ Age(s) _____
	Vehicles: We do not allow vehicles without permission. Vehicles not approved in writing may be towed away at the owner's expense.	
	1. Make _____	Year _____ Color _____ License# _____ State _____
	2. Make _____	Year _____ Color _____ License# _____ State _____
	Has applicant, spouse or any other proposed resident ever:	
	Filed for bankruptcy	No <input type="checkbox"/> Yes <input type="checkbox"/> _____
Been evicted from tenancy	No <input type="checkbox"/> Yes <input type="checkbox"/> _____	
Been convicted of a felony	No <input type="checkbox"/> Yes <input type="checkbox"/> _____	
Comments: _____		
In case of emergency contact: _____	Relationship _____	
Home Phone _____	Work Phone _____	
Address _____	City _____ State _____ Zip _____	

I hereby authorize Complete Screening, Inc, its employees and agents, to take any and all actions necessary to verify the contents of this application. I understand that such actions may include but are not limited to, a credit report, verification of employment, past rental history, police and criminal records. I will hold Complete Screening, Inc., its employees and agents harmless from liability for the accurate reporting of such information to the management and/or owners. I certify that all information provided by me is true, correct, and complete and I understand that any misrepresentation or omission is cause for the management and/or owners to reject or decline this application and/or terminate any lease based on this application. **IMPORTANT NOTICE:** It is understood and agreed that the security deposit will be FORFEITED if I/we cancel this application after 48 hours of signing.

Applicant's Signature: _____	Date: _____
Co-Applicant's Signature: _____	Date: _____
Leasing Agent: _____	Date: _____

We Check Credit-Criminal-Employment-Rental History

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We will not process any Application without payment!

**Complete Screening Inc
Background Consent Form**

In connection with my application for a rental/lease (the "Landlord") may request background records on me from Complete Screening Inc (CSI). I understand that these reports may include social security trace, credit bureau reports, criminal background searches, department of motor vehicle records, sex offender registries and other governmental public record sources. By signing below I give my consent and authorization to this landlord and any agency contacted in connection with this application to obtain the investigative reports as listed above. I release and hold harmless any individual, corporation, or private or public entity from any and all causes of action that might arise from furnishing to the Landlord and/or Complete Screening Inc information that they may request pursuant to this release. A photo or faxed copy of this release will act as the original and shall be valid for this and any future reports or updates that may be requested by the Landlord in connection with my application.

Signature _____ Date _____

Print Name _____

Please print legibly. Information that we are unable to read could result in a delay in the application verification process.

Social Security Number _____ Date of Birth _____

Driver's License Number _____ State of Issue _____

Present Address _____

City State Zip _____

Previous Address _____

City State Zip _____

Have you ever been arrested or convicted of a felony/misdemeanor? Yes No

If so, where did the arrest/conviction take place? _____

Please provide details regarding the arrest and/or conviction: _____

EMAIL ADDRESS _____

We Check Credit-Criminal-Employment-Rental History!