



Pavilion Enterprises, LLC

RENTAL APPLICATION  
Equal Housing Opportunity



The undersigned hereby makes an application to rent the property located at:

936 Oxford Street Fort Wayne, In 46806

Requesting lease to start as of \_\_\_\_\_ (date) at a monthly rent of \$ 625 .

Security/Damage deposit of \$ 625 shall be made prior to move in. The lease shall be for a term of: \_\_\_\_\_ months.

Exceptions are noted herein:

*(Security/Damage Deposit payment terms may be available, under special conditions. 12-24 month terms available.)*

**PLEASE TELL US ABOUT YOURSELF**

**Applicant Full Name** \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_

**Email Address** \_\_\_\_\_@\_\_\_\_\_ (required)

**Co-Applicant Full Name** \_\_\_\_\_

Home Phone ( ) \_\_\_\_\_ Work Phone ( ) \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security # \_\_\_\_-\_\_\_\_-\_\_\_\_

**Email Address:** \_\_\_\_\_@\_\_\_\_\_ (required)

Number of total persons that will reside with you in this property (including Applicant & Co-Applicant) \_\_\_\_\_

All additional persons must be listed at move-in. All additional persons and changes in occupancy during the lease term must be listed and subject to prior approval, within 14 days of their anticipated move in.

Names and ages of **all additional persons:** \_\_\_\_\_

List **all pets** that will be residing in this property (include type, age & size) \_\_\_\_\_

Pet Fee is Required.

**PLEASE GIVE RESIDENTIAL HISTORY (LAST 2 YEARS) (write on backside for additional information)**

**Current Address** \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month/Year Moved In \_\_\_\_\_ Month/Year Moved out \_\_\_\_\_ Deposit Refunded? \_\_\_\_\_

Rent Paid \$ \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Landlord Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

**Prior Address** \_\_\_\_\_ Apt# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month/Year Moved In \_\_\_\_\_ Month/Year Moved out \_\_\_\_\_ Deposit Refunded? \_\_\_\_\_

Rent Paid \$ \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Landlord Name \_\_\_\_\_ Phone ( \_\_\_\_\_ ) \_\_\_\_\_

**PLEASE DESCRIBE YOUR CREDIT HISTORY AND ADDITIONAL INFORMATION**

Have you declared bankruptcy in the past seven (7) years? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been evicted from a rental / mortgaged residence? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you had two or more late rental / mortgage payments in the past year? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever willfully/ intentionally refused to pay rent /mortgage when due? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you or anyone to reside in the property ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_  
If YES, please explain the conviction. (Explain on the reverse side.)

**PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION**

**Applicant Employment Status:** \_\_\_ Full Time \_\_\_ Part Time \_\_\_ Student \_\_\_ Unemployed \_\_\_ Retired \_\_\_

Employer \_\_\_\_\_ School \_\_\_\_\_

Dates Employed /Enrolled: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_

Position/ Degree Pursued \_\_\_\_\_

Supervisor /Advisor Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Salary / Student Income \$ \_\_\_\_\_ per \_\_\_\_\_.

If employed/ enrolled less than 12 months, give name & phone of previous employer or school and referral contact:  
\_\_\_\_\_ Phone ( ) \_\_\_\_\_

**Co-Applicant Employment Status:** \_\_\_ Full Time \_\_\_ Part Time \_\_\_ Student \_\_\_ Unemployed \_\_\_ Retired \_\_\_

Employer \_\_\_\_\_ School \_\_\_\_\_

Dates Employed /Enrolled: From: \_\_\_/\_\_\_/\_\_\_ To: \_\_\_/\_\_\_/\_\_\_

Position/ Degree Pursued \_\_\_\_\_

Supervisor /Advisor Name \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Salary / Student Income \$ \_\_\_\_\_ per \_\_\_\_\_.

(If employed/ enrolled less than 12 months, give name & phone of previous employer or school and referral contact:  
\_\_\_\_\_ Phone ( ) \_\_\_\_\_

**ADDITIONAL INFORMATION**

If you are self-employed or have other sources of income for consideration, please the list sources of income and a person or institution (banker, contractor, business contract contact, etc.) who we may contact to verify the income. **You must provide 30 days of supporting documentation for all sources of income. (paystubs, SSI award letter, alimony, child support, government assistance, etc.**

**Applicant Driver's License Number** \_\_\_\_\_ State \_\_\_\_\_

Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_, Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_

Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_, Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_

**Co-Applicant Driver's License Number** \_\_\_\_\_ State \_\_\_\_\_

Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_, Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_

Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_, Type/Year Car \_\_\_\_\_ Plate # \_\_\_\_\_

**Personal Reference or Emergency Contact:**

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Write others on the back.

**ADDITIONAL COMMENTS:**

Please give any additional information that might help owner/management evaluate this application?  
Write below and more on the back, if needed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby apply to lease the above described premises. I warrant that all statements above set forth are true. I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. Applicant (s) understand (s) that this is only an application for a lease and not a promise of lease. Once application is received and reviewed, the Landlord has the right to either accept or deny this application.

Please sign: X \_\_\_\_\_ Date \_\_\_\_\_  
Name of Applicant

Please sign: X \_\_\_\_\_ Date \_\_\_\_\_  
Name of Co-Applicant





# Pavilion Enterprises, LLC



\_\_\_\_\_ Date

\_\_\_\_\_ Employer Name

\_\_\_\_\_ Address

\_\_\_\_\_ City, State Zip

Dear Human Resources or Managing Supervisor,

This letter is requesting employment information verification for the purposes of renting a residence for \_\_\_\_\_, your current employee.

The authorization for release of information is attached, along with a copy of his/her identification. Please verify that he/she is currently gainfully employed in good standing with your organization and that his/her employment is highly likely to continue. If yes, to both conditions, please provide additional information required below and return to Pavilion Enterprises, LLC as promptly as possible:

Your Employee's Position: \_\_\_\_\_

Is this position (check one): \_\_\_\_\_ *Full time* \_\_\_\_\_ *Part time* \_\_\_\_\_ *Contract* \_\_\_\_\_ *Temporary*

Average Salaried Monthly Compensation: \$ \_\_\_\_\_ Full Time \$ \_\_\_\_\_ Part Time

If paid hourly, then what is their hourly rate? \$ \_\_\_\_\_

How many hours, on average, do they work per week? \_\_\_\_\_ hours

Is this position expected to continue as regular permanent employment for this individual? Yes \_\_\_\_\_ No \_\_\_\_\_

Is this employee currently in good standing with your company? Yes \_\_\_\_\_ No \_\_\_\_\_

As an officer or manager of your company and by your signature below you are attesting that confirms the above information accurate and true. Completed by:

\_\_\_\_\_ Name \_\_\_\_\_ Position \_\_\_\_\_ Date

Please send your response via phone call, email or postal mail, to the contact information given below.

**Pavilion Enterprises, LLC**  
 Real Estate Brokerage  
 P.O. Box 11552, Fort Wayne, IN 46859  
 260-415-5298 phone

[pavilionenterprises@msn.com](mailto:pavilionenterprises@msn.com)



# Pavilion Enterprises, LLC

## Applicant

### AUTHORIZATION Release of Information

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree to permit an investigation of the following for the purpose of renting a property at \_\_\_\_\_ Fort Wayne, Indiana 468\_\_\_\_\_.  
\_\_\_\_\_

Please provide the information requested below to Pavilion Enterprises, LLC.

- Credit History (and credit report)
- Tenant History
- Banking Verification
- Driving Record
- Employment Verification
- Criminal History Check  
Including all records:  
-National, State and Local, including Violent/Sex Offender Registry

The Landlord will treat all information as private and confidential.  
Applicant (s) understand (s) that the Landlord practices Equal Housing Opportunity/Fair Housing policies according to law.

**The above information, to the best of my knowledge, is true and correct.**

Please sign: X \_\_\_\_\_  
Name of Applicant Date

Attached: Copy of photo ID or Driver's License



**Pavilion Enterprises, LLC**

**Co-Applicant**

**AUTHORIZATION  
Release of Information**

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I agree to permit an investigation of the following for the purpose of renting a property at  
\_\_\_\_\_ Fort Wayne, Indiana 468\_\_\_\_.

Please provide the information requested below to Pavilion Enterprises, LLC.

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The Landlord will treat all information as private and confidential.  
Applicant (s) understand (s) that the Landlord practices Equal Housing Opportunity/Fair Housing policies according to law.

**The above information, to the best of my knowledge, is true and correct.**

Please sign: X \_\_\_\_\_  
Name of Co-Applicant Date

Attached: Copy of photo ID or Driver's License

## Receipt of Security Deposit

Equal Housing Opportunity

When receiving and signing this **Receipt of Security Deposit**, the Landlord is declaring that they have received the sum of: \$ \_\_\_\_\_ as a **full Security/Damage Deposit** on the rental property located at: \_\_\_\_\_ **Fort Wayne, In 468**\_\_\_\_\_.

It is understood by all parties that by the issuance and signage of this **Receipt of Security/Damage Deposit** that the Landlord is **APPROVING** the leasing of this said property to the below named Applicant. The Landlord will, at this point, hold the property for the Applicant.

If the Applicant **does not** fulfill the terms of the signed application and this consequent hold on the property, the Landlord has the right to keep 50% of the Security/Damage Deposit paid as evidenced by this receipt, **without any further refund**, as property was removed from the market and other leasing opportunities may have been lost to the landlord due to applicant not moving in. Furthermore, Landlord may in turn lease/sell/option the property to someone else without recourse.

If the Applicant **does** fulfill the terms of this approved application then the terms of the lease agreement regarding the Security/Damage Deposit shall apply. If the property is returned to the Landlord in the same condition as when delivered to the Applicant/Lessee, then Landlord shall return the Security/Damage Deposit to the Lessee within 45 days from when the Lessee has fulfilled 1) the lease agreement terms, 2) moved entirely out of the property and left it "broom clean" no debris inside or outside, and 3) the Landlord has inspected and approved its condition, then Security/Damage Deposit shall be released per the terms in the executed lease agreement.

Please sign: X \_\_\_\_\_ Date \_\_\_\_\_  
Name of Landlord Date

Please sign: X \_\_\_\_\_

Please sign: X \_\_\_\_\_ Date \_\_\_\_\_  
Name of Applicant / Co Applicant Date

### Summary of Initial Move in Rent, Deposits and Fees

### Paid Amounts

Item	Amount Due	Lessee Initials	Landlord/ PM Initials
Initial month's rent payment (Payable ___/___/___)	\$ _____		
Early Possession Rent Per Diem Rate: \$ _____ From ___/___/___ To ___/___/___	\$ _____		
Application Fee:	\$30.00		
Credit History Check Fee:	\$30.00		
\$ ___ Pet Occupancy Fee, per pet:	\$ _____		
Lease Closing Fee:	\$ 25.00__		
Security Deposit Lump Sum:	\$ _____		
Security Deposit Payment Plan (Payable in ___ payments of \$ _____ each plus a service fee of \$ _____.)	\$ _____		
<b>Total Move-in Payments Due</b>	<b>\$ _____</b>		



Please sign: X \_\_\_\_\_ Date \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_

Please sign: X \_\_\_\_\_ Date \_\_\_\_\_ X \_\_\_\_\_ Date \_\_\_\_\_

## Utility Information Sheet

Equal Housing Opportunity

Regarding the property located at:      **936 Oxford**      , **Fort Wayne, IN 46806**      .

A final reading for **all utilities** that are currently in the Landlord's name shall be on      /      /      .

The new tenant needs to call all the utility companies below and have service instated in their name also on or before      /      /      . Tenant shall notify the Landlord that utilities have been turned on in their name no later than      /      /      .

If the tenant has not had utilities turned on in their name by the start of the lease date, or if at any time during the lease, utilities are not on, the Landlord may, at their discretion, turn utilities back on in their own name. However, tenant shall then be responsible for all fees and/or charges associated with the utilities from that date forward. Furthermore, the Landlord will proceed to protect the property from damage due to lack of water, gas or electricity. Also, the lease would be in default and formal procedures for default status would begin immediately.

As a convenience, listed below, is a list of the utility companies and their phone numbers that may provide services to this property.

### Mandatory Utility Companies

<b>Gas Company</b>	NIPSCO	1-800-464-7726
<b>Electric Company</b>	American Electric Power	877-237-2886
<b>Water/Sewage Company &amp; Trash Collection</b>	City Utilities	260-427-1234

### Optional Utility Companies

<b>Phone Service</b>	Verizon	1-800-483-1000
<b>Cable Service</b>	Comcast	260-456-9000
<b>Trash Service</b>	National Serv-all Waste Management	260-747-4117 260-447-5585





**Applicant/Tenant Name:** \_\_\_\_\_  
*(Must complete separately for each applicant.)*

## **Application Documents Checklist**

*All applicable documents, including letters of explanation, must be received before application approval.*

Application and Fee

Completed Deposit Sheet

Utilities Disclosure and Agreement Sheet

Credit Report      within most recent 30 days

2 years Tenant History with no evictions

Banking Verification for Automatic Draft

BMV Driving Record Printout

1 year Employment Verification

Other Income Verification

    P&L Statement & Tax Returns for Self Employed

Other Informational Documents as needed

Criminal History Check

    State Police  
    Local Police  
    Violent/Sex Offender List