



Gold Trust Realty

RENTAL APPLICATION

Rental Property Address: _____
How did you learn of the property? _____ # of Applicants: _____ Application Fee Paid: _____

APPLICANT INFORMATION:

First Name: _____ Middle Name: _____ Last Name: _____
Social Security #: _____ Birthdate (MM/DD/YY): _____
Driver's License #: _____ Issuing State: _____

RESIDENT HISTORY: 2 Years History Required

Current Address: _____ City: _____ State: _____ Zip: _____
Current Phone #: _____ Landlord Name: _____ Phone: _____
Monthly Rent Amount: _____ Residency dates: From: _____ To: _____
Reason for moving: _____

Previous Address: _____ City: _____ State: _____ Zip: _____
Landlord Name: _____ Phone: _____ Monthly Rent Amount: _____
Residency dates: From: _____ To: _____ Reason for moving: _____

Previous Address: _____ City: _____ State: _____ Zip: _____
Landlord Name: _____ Phone: _____ Monthly Rent Amount: _____
Residency dates: From: _____ To: _____ Reason for moving: _____

EMPLOYMENT HISTORY: 2 Years History Required

Current Employer: _____ Phone #: _____ Supervisor: _____
Address: _____ City: _____ State: _____ Zip: _____
Position: _____ Monthly income: _____ Employment Dates: From: _____ To: _____

Previous Employer: _____ Phone #: _____ Supervisor: _____
Address: _____ City: _____ State: _____ Zip: _____
Position: _____ Monthly income: _____ Employment Dates: From: _____ To: _____

BANK REFERENCE:

Name of Bank: _____ Branch Location: _____ Phone: _____
Checking Account #: _____ Savings Account #: _____

PERSONAL REFERENCES: 3 References Required

NAME	ADDRESS	RELATIONSHIP	PHONE #
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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CO-APPLICANT INFORMATION:

First Name: _____ Middle Name: _____ Last Name: _____
Social Security #: _____ Birth date (MM/DD/YY): _____
Driver's License #: _____ Issuing State: _____

RESIDENT HISTORY: 2 Years History Required

Current Address: _____ City: _____ State: ____ Zip: _____
Current Phone #: _____ Landlord Name: _____ Phone: _____
Monthly Rent Amount: _____ Residency dates: From: _____ To: _____
Reason for moving: _____

Previous Address: _____ City: _____ State: ____ Zip: _____
Landlord Name: _____ Phone: _____ Monthly Rent Amount: _____
Residency dates: From: _____ To: _____ Reason for moving: _____

Previous Address: _____ City: _____ State: ____ Zip: _____
Landlord Name: _____ Phone: _____ Monthly Rent Amount: _____
Residency dates: From: _____ To: _____ Reason for moving: _____

EMPLOYMENT HISTORY: 2 Years History Required

Current Employer: _____ Phone #: _____ Supervisor: _____
Address: _____ City: _____ State: ____ Zip: _____
Position: _____ Monthly income: _____ Employment Dates: From: _____ To: _____

Previous Employer: _____ Phone #: _____ Supervisor: _____
Address: _____ City: _____ State: ____ Zip: _____
Position: _____ Monthly income: _____ Employment Dates: From: _____ To: _____

BANK REFERENCE:

Name of Bank: _____ Branch Location: _____ Phone: _____
Checking Account #: _____ Savings Account #: _____

PERSONAL REFERENCES: 3 References Required

<i>NAME</i>	<i>ADDRESS</i>	<i>RELATIONSHIP</i>	<i>PHONE #</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



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OCCUPANT INFORMATION:

How many individuals will occupy the unit? _____ List the individuals that will be occupying the unit:
NAME *RELATIONSHIP* *DATE of BIRTH*

- a. _____
- b. _____
- c. _____
- d. _____
- e. _____

- Have you or the co-applicant broken a rental agreement? Yes No
- Have you or the co-applicant been evicted? Yes No
- Have you or the co-applicant been convicted of a drug-related crime? Yes No
- Have you or the co-applicant been convicted of a felony? Yes No
- Have you or the co-applicant filed bankruptcy? Yes No

PETS/SERVICE ANIMALS INFORMATION:

Do you own any pets that will reside at the property? Yes No
NAME *COLOR* *AGE* *TYPE* *WEIGHT* *LICENSE #* *SPAYED/NEUTERED*

- a. _____
- b. _____

Will you have an assistive or service animal? Yes No (accommodation request w/ application)

VEHICLE INFORMATION:

How many vehicles do you plan to park at the property? _____
MAKE/MODEL *YEAR* *COLOR* *LICENSE PLATE #* *STATE*

- a. _____
- b. _____

APPLICATION TERMS/BACKGROUND CHECK AUTHORIZATION: READ CAREFULLY

Applicant represents that all of the above statements are true and complete, and hereby authorizes verification of above information, references and credit records. Applicant acknowledges that false information contained herein constitutes grounds for rejection of this application if discovered before move-in. Applicant acknowledges that management may not be able to complete comprehensive action of this agreement before move in. Management reserves the right to verify application information after move-in and may convert the proposed Rental Agreement to a month to month term if misleading information is contained in this application. This application is preliminary only and does not obligate owner or representative to execute a lease or deliver possession of the proposed premises.

Application fee is nonrefundable.

Applicant's printed Name _____
 Applicant's Signature _____ Date _____
 Co-Applicant's printed Name _____
 Co-Applicant's Signature _____ Date _____