Rental Application

Please read and follow all instructions carefully.

Incomplete, inaccurate, or falsified information will disqualify your application. All persons over the age of 18 who will reside on the premises are required to apply. Two adult applicants may apply on a single application as "Applicant" and "Co-Applicant" using the appropriate fields below. If there are more than two adults, please submit an additional application with a note indicating the other applicants in the "additional information" box. <u>*Please Note: We do not accept Pets.</u>

| ress of Rental Property | City State Zip Code | Requested Move-in Date | Requested | No. of Bedroom |
|--|------------------------------------|--|----------------|---|
| First Name | Last Nam | e DL # /State ID# | | DOB |
| Primary Phone # | Secondary Phone # | Email A | Email Address | |
| | Last Name | e DL # /State ID# | ŀ | DOB |
| Primary Phone # | Secondary Phone # | Secondary Phone # Email Address | | |
| Complete | e this information if someone else | is responsible for paying the rent o | n your behalf. | |
| First Name | Last Nam | e DL # /State ID# | | DOB |
| Primary Phone # | Secondary Phone # | Email A | Email Address | |
| Please note: V | | t be identified below. If over 18, plo f people allowed in each unit. S | | a separate application of the |
| Occupant #2: Name & Re Additional Info: | elationship | | | - Maximu Occupat 1 Bdrm: 2 0 2 Bdrm: 4 0 3 Bdrm: 5 0 |
| | | | | |
| Applicant's Current Ac | ddress | St | art Date | Monthly Rent |
| Owner/Manager Nar | ne Phone Number | Reason for I | eaving | |
| Co-Applicant's Curren | t Address | S | tart Date | Monthly Rent |
| | | | | |

Rental Application

| Applicant's Current Employer | Start Date | Monthly Salary |
|--------------------------------|--------------|----------------|
| | | |
| licant's Supervisor Name | Phone Number | Email |
| o-Applicant's Current Employer | Start Date | Monthly Salary |
| | | |
| o-Applicant's Supervisor Name | Phone Number | Email |

PLEASE ANSWER THE FOLLOWING QUESTIONS:

| Does anyone named on this application smoke or have water filled furniture? Yes O No O Have any of the named applicants ever willfully or intentionally refused to pay rent when due? Yes O No O | | | | | | |
|---|--|--|--|--|--|--|
| Have any of the named applicants had 2 or more late rental payments in the past year? Yes \bigcirc No \bigcirc | | | | | | |
| Have any of the named applicants ever been evicted from a tenancy or left owing money? Yes \bigcirc No \bigcirc | | | | | | |
| Have any of the named applicants ever broken a lease? Yes \bigcirc No \bigcirc | | | | | | |
| Have any of the named applicants ever been convicted of a felony? Yes \bigcirc No \bigcirc | | | | | | |
| Have any of the named applicants ever claimed bankruptcy? Yes \bigcirc No \bigcirc | | | | | | |

IF YOU ANSWERED "YES" TO ANY QUESTION ABOVE, PLEASE PROVIDE DETAILS BELOW:

I understand this is an <u>application to rent only</u> and does not guarantee that a rental agreement will be offered to me. I warrant that all the information provided on this application is true and correct and understand that if I am given a lease agreement, my tenancy may be terminated if I have made any false or incomplete statemements. By signing below, I explicitly authorize the Owner or Manager or Agent to obtain a credit report, conduct a criminal background check, verify income, and verify any and all information provided in this application. This includes speaking to current/previous employers and current/previous landords. By signing below, the applicant agrees to pay \$43.00 nonrefundable screening fee, this fee is paid directly to TransUnion. The fee is not charged until which time there is an available unit and manager has contacted applicant. The applicant will own the reports provided through TransUnion and will grant access to Owner or Manager or Agent. Please note: The credit report provided by TransUnion is a "soft inquiry" and will not adversely affect credit rating.

| Print Applicant Name | Applicant Signature | Date |
|---|------------------------|------|
| | | |
| | | |
| Print Co-Applicant Name (if applicable) | Co-Applicant Signature | Date |
| | | |
| | | / |
| Print Co-Signer Name (if applicable) | Co-Signer Signature | Date |
| | | |