Construction * RES Development * Leasing

10522 S Cicero Ave * Suite 301A Oak Lawn, Illinois 60453 Office: (708) 634-2491 Fax: (708) 634-2492

Each applicant is required to submit a **NON-REFUNDABLE** credit check fee in the Amount of \$35.00.

The undersigned hereby authorizes the Agency to verify all information as indicated

Within this application, including, but limited to an inquiry to a credit reporting

Agency with whom agency subscribes, in addition, the undersigned acknowledges

He/she had read the application in question and agrees to the terms herein as set forth.

Signed:	
Co-Applicant:	
Date:	



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Application for Lease

(Non-refundable credit check fee covers the cost of verifying reference and a credit check this application is subject to approval of owners)

Applicant's Information:			Fee	Per Person: \$35.00
Name:		-		
Date of Birth:	Age	Date:/_		
Drivers License / State ID:		S.S.N		
Phone: Day Time ()	Eve	ening ()		
Current Address:				Apt
City	State _	Zip		_
Rent per month \$	No. of months)		
Reason for leaving				
Agent/Landlord name				
Phone No.()	·	Secondary No. ()	
Previous Address, if less than	3 years			
City	State		Zip	
Rent per month \$	No. months			
Reason for Leaving				
Agency /Landlord				
Phone No.(- s	econdary No. ()	_

Construction * RES Development * Leasing

Employment Information:			
Occupation:	Phone: ()		
Name of Employer:			
Addresss:			
City			
No. of years: Depa	rtment Supervisor/ Man	ager	
Gross Monthly Income \$	Other Inc	come \$	
Best time you can be reached	d? Home: am	/pm Work:	am/pm
Applicant Personal History			
Have you ever been evicted?	Do you ha	ve any Judgments or ban	kruptcies?
If so, please explain			
Have you ever been convicte	d of a felony?	if so, please expla	in
Co-Applicant(s) /Spouse P			
Date of Birth:			
Drivers Lic/ State ID:			
Phone: Day Time()	Evenin	g()	
Current Address:	•		Apt
City	State	Zip	
Rent per month \$	No. of months	-	
Reason for leaving			-
Agent/Landlord name			
Phone No (Pagandan, No. /	

Construction * RES Development * Leasing

Previous Address, if less than 3 years			
City	State	zZip _	
Rent per month \$	No. months		
Reason for Leaving			
Agency /Landlord			
Phone No.()	Secondary No. ()	
Co-Applicant (s) /Spo	ouse Employment Inform	mation:	
Occupation:		Phone: ()	
Name of Employer:			
Addresss:			·
City	State:	Zip Code:	
No. of years:	Department Supervisor/	Manager	·····
Gross Monthly Income	\$ Othe	r Income \$	
Best time you can be re	eached? Home:	am/pm Work:a	ım/pm
Co-Applicant (s) /Spo	ouse Personal History:		
Have you ever been ev	ricted? Do you	ı have any Judgments or bank	ruptcies?
If so, please explain			
Have you ever been co	nvicted of a felony?	if so, please explai	n
Personal Reference's	s (other than relatives)	()	
Name	Address	Phone	Relation
Name	Address	() Phone	Relation

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In case of an Emergency (Contact)		
Name	Phone)
	()
Name	Phone	<i></i>
APARTMENT OCCUPANTS:		
Who will occupy the unit/Home?		
Number of Adults Number of ch	ildren UNDER 18 year	s of age
List the name(s) of all persons that will occup	y the unit:	
(DO NOT INCLUDE THE APPLICANT OR C	O-APPLICANT)	
Name		Age
PLEASE NOTE: PETS OF ANY KI	ND ARE NOT AL	LOWED!
I certify that the above information provided on thi	s application is true and	correct to the best of my knowledge.
I future understand that this application WILL be it	ncorporated therein, as a	part of the lease sought to occupy
said premises, and if any information is found to IMMEDIATE TERMINATION OF LEASE.	be INCORRECT or UNT	RUE, its finding shall be grounds for
I authorize ARMSTRONG Properties I LLC to run a	a hackground check and	ohtain a conv of my credit report
Tadilonzo Annis in Grad i Topernes i Electoraria	background check and	obtain a copy of my credit report.
Signature	D	ate
Applicant		
Signature	D	ate
Co-Applicant /Spouse		