



& ANBRO APARTMENTS LLC

RENTAL APPLICATION

Application Information

Full name:	Last First M.I.	Date:	
Address:	Street address Apt/Unit # City State Zip Code	Phone:	
		Email:	
Date Available:		S.S. no:	
		Date of Birth	
Property Applied For:			
*Please attach a picture of your PHOTO ID or email us a copy to anbrollc@yahoo.com. Application can be emailed or text us 812-603-2239 to arrange for a drop off location or mailing address. All household members over 18-year-old have to complete an application.			
How long do you plan to live here?	1 year ☐	2 year ☐	3 years + _____
How many leases have you broken?	0 ☐	1 ☐	2+, comments: _____
If approved, who will be living with you?	Age: _____ Age: _____	Name Name	_____ _____
	Age: _____	Name	_____
Do you have any evictions filed against you?	0 ☐	1 ☐	2+, comments: _____
How many times have you had bed bugs?	0 ☐	1 ☐	2+, comments: _____
Convicted felon?	Yes ☐	NO ☐	Explain _____
Registered Sex Offender?	Yes ☐	NO ☐	Explain _____
How many vehicles do you plan to bring to the property?	1 ☐	2 ☐	Trailers or large trucks? _____
Tell us Make & Model/ Year _____	_____		_____
How did you find out about the property?		Explain:	_____
Attorney Name _____			_____

Past Address History (at least 5 years):

Address:		Property Manger Name & Phone		
Move in:	Move out:	Did you leave on good terms?	Yes ☐ No ☐	Rent amount \$

Address:		Property Manger Name & Phone		
Move in:	Move out:	Did you leave on good terms?	Yes ☐ No ☐	Rent amount \$

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Move in:	Move out:	Did you leave on good terms?	Yes ☐ No ☐	Rent amount \$

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Move in:	Move out:	Did you leave on good terms?	Yes ☐ No ☐	Rent amount \$

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☐

I give permission for Anbro LLC management to contact my previous landlords discussing information about my tenancy.

Credit References

Please list three, bank or car dealerships ect:

Lender		Loan Purpose	
Balance		Payment	

Are you in good standing?	Phone:
Lender	Loan Purpose
Balance	Payment
Are you in good standing?	Phone:

Lender	Loan Purpose
Balance	Payment
Are you in good standing?	Phone:

Employment

Company:	Phone:
Address:	Supervisor:
Job title:	Hours Pay
Gross wages after monthly expenses: - car phone loans, credit cards etc.	

I give permission for management to contact my employer to verify my employment and contact credit agencies. Yes ☐ No ☐

More than 1 job? List 2nd here:

Company:	Phone:
Address:	Supervisor:
Job title:	Hours Pay
Gross wages after monthly expenses: - car phone loads, credit cards etc.	

I give permission for management to contact my employer to verify my employment and contact credit agencies. Yes ☐ No ☐

Any other source of Income? You want us to consider? Explain: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at discharge: _____ Type of discharge: _____

If other than honorable, explain: _____

Emergency Contact

Name _____ City _____ Zip _____

Address _____ Phone: _____

Relationship _____

Do you have pets?

If yes complete a pet/animal application, you can print an application or submit it online.

Pet application fees will not be due until your residency is approved. \$275 per animal non-refundable.

Other helpful comments

Application Fees

Single application fee is \$35. Two-Adult application fee is \$50. Due with application

All members 18 years of age living on property must complete an application. Maximum of two per property.

Application fees must be paid to be reviewed. You can pay for it online at www.rentfromanbro.com. You can drop into First Financial Bank and make a deposit to our account #5316133718 please list your name and phone number on deposit ticket.

You can also text us to arrange a drop off of cash, or cashiers check, or money order. 812-603-2239

Disclaimer and signature

If this application leads to residency, I understand that any false or misleading information in these applications would be ground for eviction. I hereby authorize Anbro LLC and/or its agents to make investigation of my background, references, character, past employment, consumer reports, education, and criminal history record information which may be in any federal, state, or local files.

Signature: _____ Date: _____

