APPLICATION FOR OCCUPANCY



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1.	Address of Rental Property Applying for:							
	APPLICANT PERSONAL INFORM	MATION						
2.	NAME:							
3.								
4.		– `	,					
	EMAIL ADDRESS		TELEPHONE					
5.	COOLAL OF OUR TRY NUMBER							
6.	SOCIAL SECURITY NUMBER		DATE OF BIRTH					
0.	DRIVER'S LICENSE / GOVERNMENT ISSUED ID	NUMBER	STATE	EXPIRA	ATION DATE			
7.								
	DESIRED DATE OF OCCUPANCY		DESIRED LENGTH C	OF LEASE				
8.	How did you hear about us?							
9.	Sign Our website Ad	Referral:		Other:				
	EMPLOYMENT & BANK REFERE	NCES (Minimum o	ne year verified empl					
10.				oyment required)				
11.	Current Employer:		City:	State:	7IP Code:			
12.	Telephone:	How long?:	Oity:	Start date:				
13.	Department/Position:	City: State: ZIP Code: How long?: Start date: Approximate Monthly Gross Income: \$						
		If you have been with your current employer less than one year, please complete the following:						
15.	Previous Employer:	•	· •	_				
16.	Address:		City:	State:	ZIP Code:			
17.	Telephone:	How long?:		Date left:				
18.								
19.	' '							
20.	Bank:		Branch:					
21.		ephone:						
22.	Account Number (checking):							
23.	Other Income:				_ (Indicate source & amount)			
	RESIDENCE HISTORY (Minimum	one year required)						
24.	Current Rent/Mortgage Payment: \$		How long?:	C	own Rent			
25.	Current Address:							
26.	City:		State:_	ZIP C	ode:			
27.	Landlord:			Telephoi	ne:			
28.	If owned, please provide mortgage company name and address:							
29.	Mortgage Company:		Tele	phone:				
30.	Address:							
31.	City:				ode:			
32.	-	•	•	•				
33.	Previous Address:							
34.	City:		State:_	ZIP C	ode:			
35.	How Long?:				>>			

Fax:

Application for Occupancy >>

Name: Name: Name: Additional occupants, see attached. Person(s) to notify in case of emergency and that you authorize to e	Tele Rela Tele Rela Tele Rela Tele	ephone: ation: ephone: ation: ephone:	D.O.B.:				
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	nter and take	possession of you	ur personal property in the ever				
eath, pursuant to A.R.S. §33-1314(F), disability or incarceration:							
Name:							
Address: City:		State:	ZIP Code:				
Phone: Email:							
ETS/SERVICE ANIMALS							
ill you have pets? Yes No (assistive and service anim	als are not co	nsidered "nets")					
escription of pets (recent photo required):	als are not con	noidered peto j					
	Con	don	Majabt				
Breed: Age:	Gen	der:	weight:				
			Weight:				
ill you have an assistive or service animal? Yes No (acc	commodation i	request required v	vitn application)				
EHICLE INFORMATION							
otal Number of Vehicles (including company vehicles):							
chicles:							
	Voar	Color:	Lic Plate #:				
Make:			Lic. Plate #:				
Make: Model:	Year:	Color:	Lic. Plate #:				
Make: Model:							
escription of any other vehicles (boat, trailer, truck, recreational vehicle, e	(i.c.) you would	like to keep on pro	operty.				
Prior written permission separate from this application must be obtained	from managen	nent.					
CREDIT AND BACKGROUND HISTORY (ANSWER ALL QUESTIONS FOR YOURSELF AND FOR ANYONE WHO WILL OCCUPY THIS RESIDENCE)							
	10 WILL OCC	JUPY INIS RESIL	JENGE)				
Have you ever been evicted? Yes No							
Has a notice of eviction ever been filed against you? Yes No If so, when:							
Have you ever declared bankruptcy? Yes No If so, when: Discharge Date: Have you had two or more late rental payments in the past year? Yes No							
Have you had two or more late rental payments in the past year?	Ye	=					
Have you ever willfully or intentionally refused to pay rent when due?	∐ Ye	=					
Do you currently owe any monies to an apartment community or landl	=	=					
Do you use illegal drugs?	∐ Ye	=					
Have you ever engaged in the distribution or sale of illegal drugs?							
Have you ever been convicted, arrested or charged with any crime?							
Please give detailed explanation(s), date(s), and names for any quest	lion answered	res above:					

ADDITIONAL INFORMATION						
Have you or anyone in your household had, or do you If yes, please explain:						
Please give any information that might help evalua	ate this application	:				
DEPOSIT TO HOLD AGREEMENT						
In consideration of management holding this property						
• .	\$ \$	and per person over 18 in CERTIFIED FUNDS ONLY*				
*Additional fees will apply for non-U.S. residents and CALL FOR CORRECT APPLICATION FEE AMOUN		g to current rates. IF YOU ARE A NON-US RESIDENT, PLEASE NG. Non-resident application fee				
The earnest/holding deposit is refundable if my application is not approved (14-day delay required for bank clearance of check). If my Application is approved, the earnest/holding deposit is credited to the required move-in costs. IF APPLICANT SHOULD WITHDRAW THIS APPLICATION WITHIN 7 DAYS AFTER WRITTEN NOTIFICATION OF ACCEPTANCE, a minimum of \$						
Total deposits/fees submitted with application	\$					
I hereby authorize and instruct Owner/Broker/Property Manager to investigate the information supplied by me and to conduct inquiries concerning my income, credit and character for the purpose of verifying and qualifying for this rental and any renewals thereof. I further authorize the release of any and all information available from any reference, former owners, and credit reporting services, department or motor vehicles, and governmental agencies. I hereby release and hold harmless all parties from liability for any damages that may result from furnishing this information to its owners, its agents and others. NOTE: Copy of actual credit report will not be provided to applicant by Owner/Broker/Property Manager.						
information prior to move-in. Owner/Broker/Property M convert the proposed Lease Agreement to a month-to- if false or misleading information is contained in this A	Manager reserves the month term or declare Application. Applican bwner or owner's rep	t be able to complete a comprehensive evaluation of this e right to verify application information after move-in and may e the lease irreparably breached and seek immediate eviction it agrees to the terms of this Deposit to Hold Agreement. This presentatives to execute a lease or deliver possession of the state and local fair housing laws and regulations.				
_ · · · · · · · · · · · · · · · · · · ·	e Brokerage, its E	Broker, its Agents, and employees are agents of and				
represent the Owner in leasing this property.	present the Owner in leasing this property.					
By signing below, I acknowledge and accept the qua application will be approved. This application must be signed by applicant.	alifying criteria and p	(Applicant's Initials Required) APPLICANT policies of the Owner/Broker/Property Manager by which my				
^ APPLICANT SIGNATURE		MO/DA/YR				
FALSIFYING INFORMATION ON THIS APPLICATIO	N IS GROUNDS FO	OR REJECTION.				
FOR OFFICE USE ONLY						
Agent Name:						
Co-Broke? Yes No Exclusive? Yes	es No					
Referred by:		At:				
ACCEPTED Date of Written Notification: REJECTED Date Denial Letter Was Sent						
	::					