

# Lease Application

## Applicant Information

Name:		
Date of Birth:	SSN:	Phone:
Current Address:		
Landlord:	Contact Information:	
City:	State:	ZIP:
Own or Rent	Monthly payment or rent:	How long?

## Employment Information

Current Employer:		
Employer Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP:
Position:	Hourly or Salary	Annual income:

## Emergency Contact

Name of a relative not residing with you:			
Address:			
City:	State:	ZIP:	Phone:
Relationship:			

## Spouse Information

Name:		
Date of Birth:	SSN:	Phone:

## Spouse Employment Information

Current Employer:		
Employer Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP:
Position:	Hourly or Salary	Annual income:

## References

Name:	Address:	Phone:

## Children

Name:	DOB:	Name:	DOB:
Name:	DOB:	Name:	DOB:

Please explain why you would like to have this home:

Smoking:                      Pets:

Signature of Applicant:	Date:
Signature of Spouse:	Date: