

Rental Application - 3925 Clark Ave / 839 W 39th Terr, Kansas City, MO

Applicant - Basic Information		
Name:		SSN:
Date of birth:	Phone:	Email:
Current address:		Do you smoke: Y / N (circle)
Landlord phone:	Monthly rent:	Address for how long?
Reason for potentially leaving current address:		
Even been evicted, or convicted of felony (if yes, explain):		
Previous address:		
Landlord phone:	Monthly rent:	Address for how long?
Applicant - Employment Information		
Current employer and address:		
Supervisor name:		Employer for how long?
Supervisor phone:		Supervisor email:
Position:	Hourly Salary (circle)	Annual income:
Previous employer, position, income:		
Applicant - Emergency Contact		
Name of a person not residing with you (and relationship):		
Phone, email, address:		
Co-Applicant - Basic Information		
Name:		SSN:
Date of birth:	Phone:	Email:
Current address:		Do you smoke: Y / N (circle)
Landlord phone:	Monthly rent:	Address for how long?
Reason for potentially leaving current address:		
Ever been evicted, or convicted of felony (if yes, explain):		
Previous address:		
Landlord phone:	Monthly rent:	Address for how long?
Co-Applicant - Employment Information		
Current employer and address:		
Supervisor name:		Employer for how long?
Supervisor phone:		Supervisor email:
Position:	Hourly Salary (circle)	Annual income:
Previous employer, position, income:		
Applicant and Co-Applicant - Unit, Move-In Date, Reference, Pets, Parking, Referrals, Signatures		
Unit preferred (description):		Move-in date:
Personal reference name/relationship:		Reference phone:
Notes to add (e.g., other income sources):		Reference email:
Pets - list all dogs, cats (incl. weight/age):		
Garage parking: Y / N (circle)		Make/Model/Year:
Referral bonus - name of friend, contact info:		Car License Plate:
<i>I/we authorize verification of the information provided on this form as to credit, employment, and references. I/we understand there is a non-refundable \$40 per person application/credit check fee, payable to <u>Linden Street Management LLC, 11 S. 14th Street, Pittsburgh, PA 15203.</u> I/WE STATE THAT ALL INFORMATION SET FORTH ON THIS FORM IS TRUE.</i>		
Signature of Applicant:		Date:
Signature of Co-Applicant:		Date: