Steiner Realty, L.L.C.

South Haven Apts. / The Swope Lofts 3951 S. Ellis • Wichita, KS 67216 (316) 524-5244 • (316) 524-1996 fax

Please complete all requested information on the front and back of this form. Thank you for your interest in our communities.

All applications are subject to a full credit and background check

Rental	Ap	plica	ation
Home	, .P	PIIO	ation

nental Application
FOR OFFICE USE ONLY
Date
Rent \$
Deposit \$
Apt #

Date of Application Date Needed									
Size & Location Wanted	Referred by								
Personal Information									
Applicant's Full Name		Date of B	irth						
SSN# DL #		(Last)	Ctato						
			irth						
Co-Applicant's Full Name(First) (Middle)		(Last)							
SSN# DL #			State						
Full Name of all Other Residents: (First, Middle & Last)	Relationship to	o You Date of E	Birth						
Do you or other occupants have any pets: (Please note NO DOGS are allowed)									
What Kind? Has it been fixed & de-clawed?									
Residence History									
Present Address									
(Street Address) Applicant's Phone/Cell #	Fmail		(City, State, Zip)						
	Email Landlord Phone								
Monthly Payment \$									
Reason for Moving									
Previous Address(Street Address) (City, State, Zip)									
Landlord or Mortgage Co									
Landlord's Phone									
Monthly Payment \$	Dates - From:		To:						
Reason for Moving									
Co-Applicant's Previous Address									
Landlord or Mortgage Co			(City, State, Zip)						
Landlord's Phone Email									
Reason for Moving Batter From 16.									
Banking and Credit References									
Your Credit Reference	Ever Past Due		Phone						
1.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
2.									

Employment Information							
		Dates - From: To:					
Address(Street Address)			Phone				
Position							
Previous Employer		Dates - F	rom:	To:			
Address(Street Address)			Phone				
Position							
Co-Applicant's Employer		Dates - F	rom:	To:			
Address(Street Address)			Phone				
Position							
Co-Applicant's Previous Employer		Dates - F	rom:	To:			
Address(Street Address)			Phone				
(Street Address) Position							
Any Additional Income							
	Other Info	ormation					
Other Information Total Number of Vehicles							
Make/Model				Tag #			
Make/Model							
Other Car, Motorcycle, Etc.							
HAVE YOU OR CO-APPLICANT: Been sued for non-payment of rent? (YES or NO) Been evicted or asked to move out? (YES or NO) Broken a rental agreement or lease? (YES or NO) Been Sued for damage to rental property? (YES or NO) Declared Bankruptcy? (YES or NO) If yes, when? Been convicted of a felony? (YES or NO) If yes, please explain							
In case of personal emergency, notify:			Relationship				
Address(Street Address)		Home#	Work #	:			
Applicant's Signature			Date				
Co-Applicant's Signature			Date	Date			
Co-Applicant's Signature Date Date							
FOR OFFI	CE USE ONLY - Do	Not Write B	elow This Line				
Reference Verification							
Present Landlord							
Previous Landlord							
Employment							
Previous Employer			l				
Comments:							