



2016 Chicago Lease Application

The Chicago Association of REALTORS® fully supports the practice of equal opportunity in Fair Housing.

As a REALTOR®, following is information which you need to know when using the attached Lease Application to screen of potential tenants.

In response to a disparate impact Fair Housing Act claim which was heard by the Supreme Court, the United Stated Department of Housing and Urban Development (HUD) issued guidance titled "Office of General Counsel Guidance on Application of Fair Housing Standards to the Use of Criminal Records by Providers of Housing and Real Estate-Related Transactions." While persons with criminal records are not a protected class under the Fair Housing Act, in this guidance HUD cautioned that blanket policies could violate the Fair Housing Act if they deny persons housing based on (i) a prior arrest without a conviction or (ii) a prior conviction "no matter when the conviction occurred, what the underlying conduct entailed, or what the convicted person has done since then." Those using the attached form should review HUD's guidance carefully before requesting an applicant's criminal history information.

• Those using the attached Lease Application should also be aware that Cook County's Human Rights
Ordinance also prohibits discrimination against Section 8 voucher holders. Violating federal, state, or
local fair housing laws is a serious offense and as a REALTOR®, could also rise to the level of an
Article 10 violation of the REALTORS® Code of Ethics, which provides that it is a violation to deny
equal professional services to any person for reasons of race, color, religion, sex, handicap, familial
status, national origin, sexual orientation, or gender identity.



LEASE APPLICATION



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Property Address:								
Requested Lease Start Date:	Requested	Requested Lease Term: Monthly Rent: \$ Ex: 1 year, 18 months, etc						
Annicontic None (first midd	llo lock)	• •	•					
	lle, last) t? □ yes □ no <i>if yes, co-applic</i>							
• •		•	• •					
	_/ Dat							
		Home Phone: Work Phone:						
Widdle Filone.		_ work i none						
Name of ALL other persons w	who will occupy the Property:							
Name:	Re	elationship:	DOB:					
Name:	Re	lationship:	DOB:					
Name:	Re	lationship:	DOB:					
Name:	Re	elationship:	DOB:					
Emargancy Contact Informat	ion							
Emergency Contact Informat			Phono:					
			Phone:					
Addiess								
Applicant's Current Address:		Applicant's Previo	ous Address:					
	(city, state, zip)		(city, state, zip)					
Landlord's Name:								
Landlord's Phone:								
Landlord's E-mail:								
*Moved-In Date:	Move-Out Date:	Moved-In Date:	Move-Out Date:					
*If less than two years, also complete Pr	evious Address	Monthly Donty C						
Monthly Rent: \$		Monthly Rent: \$ Reason for moving:						
Reason for moving:		Reason for moving	3					
Applicant's <i>Current</i> Employer	r:	Applicant's <i>Previous</i> Employer:						
Address:		Address:						
Supervisor's Name:		Supervisor's Name	<u> </u>					
Supervisor's Phone:			e:					
Supervisor's E-mail:			il:					
*Start Date:			End Date:					
Gross Monthly Income: \$			come: \$					
*If less than two years, also complete Pr	evious Employer							
Other Income:								
Source:	Amount: \$	When/How ofter	received:					

List All Pets (if permitted) to	be kept on the F	Property (dog	s, cats, b	oirds, et	:c):	Spayed or		Rabies Shot
Type & Breed	Color	Weight	Age	Gender		Neutered?	Declawed?	Current?
						□ yes □ no	□ yes □ no	□ yes □ no
						□ yes □ no	□ yes □ no	□ yes □ no
						□ yes □ no	□ yes □ no	□ yes □ no
				Yes	No	Explanation (If answered yes)		
Will any waterbeds or water	-filled furniture b	be on the pro	perty?			·		
Does anyone who will occup	y the property si	moke?						
Has Applicant ever:					-			
had a notice of eviction fil		in the last 7	years?					
if yes, provide year and explanati								
breached a lease or renta if yes, provide year and explanati	-							
filed for bankruptcy in the	last 7 years?							
if yes, provide year and explanati								
if yes, provide year and explanati				ш				
Is there additional information	on Applicant war	nts considere	d?					
Personal or Professional Ref	erences:							
Name:		lationshin:			Phone	/F-mail·		
Name:	NC	lationship:			Dhone	/E-mail:		
that submitting this Applicat grounds for rejection and a b	_					_		
Applicant submits a non-	refundable appl	ication fee of	\$	fo	r proce	essing and revi	ewing this Ap	plication.
		□ Paid by Che	ck 🗆 Pa	aid in Cas	sh			
	Check One: □ V	isa □ Master C	or ard □ An	nerican E	xpress	□ Discover		
Name as it appears on card			•	Billing A	ddress			
Card Number			•	Billing C	ity, State	Zip		
/								
Expiration Date	Security	Code						
Analianati Ci								
Applicant's Signature						Date		

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