

# Client Information Worksheet

Name: \_\_\_\_\_

Contact Phone #:( \_\_\_\_\_ ) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Date: \_\_\_ / \_\_\_ / \_\_\_\_\_

Date to Move: \_\_\_ / \_\_\_ / \_\_\_\_\_

Price Range: \$ \_\_\_\_\_

How Many Bedrooms: 1 2 3 4 5 :: Other: \_\_\_\_\_

How Many People: 1 2 3 4 5 6 7 8

Children: Y N :: Age('s): \_\_\_\_\_ :: Dealed?: Y N

Occupation: \_\_\_\_\_

Employer: \_\_\_\_\_

Annual Income: \$ \_\_\_\_\_

Weekly/Bi-Weekly Pay: \$ \_\_\_\_\_

Credit:      Great      Good      Ok      Poor

Do You or Other Occupants Smoke? Y N

Do you own pets? Y N      Type(s): \_\_\_\_\_

# RESIDENTIAL RENTAL APPLICATION

For Landlord Use Only  
Application for Address: \_\_\_\_\_

## Applicants Information

Name: \_\_\_\_\_ / \_\_\_\_\_  
                    First                                    Last                                    Middle                                    Date of Birth

Social Security # \_\_\_\_\_ / Driver's License#: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

## Vehicle Information

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ License Plate # \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ License Plate # \_\_\_\_\_

## Proposed Occupants

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Name: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
                    First                    Last                    Middle                    Date of Birth                    Relationship

Do you own any pets? \_\_\_\_ Yes \_\_\_\_ No

Pet Information: \_\_\_\_\_ / \_\_\_\_\_      \_\_\_\_\_ / \_\_\_\_\_  
                    Type/Breed                    Weight                    Type/Breed                    Weight

**Rental History**

**Current Address:** \_\_\_\_\_ / \_\_\_\_\_  
Street APT City State Zip Length of Time

**If Rental:** \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Apartment Community/Owner Phone# Reason for Leaving

**Current Rent/Mortgage:** \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ / \_\_\_\_\_  
Street APT City State Zip Length of Time

**If Rental:** \_\_\_\_\_ ( \_\_\_\_\_ ) \_\_\_\_\_  
Apartment Community/Owner Phone# Reason for Leaving

**Previous Rent/Mortgage:** \_\_\_\_\_

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**Employment History**

**Present Employer:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_  
Street Suite City State Zip

**Position Held:** \_\_\_\_\_ / **Annual or Monthly Salary:** \_\_\_\_\_ / **Date Started:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ / **Supervisor's Phone #:** \_\_\_\_\_

**Spouse's Present Employer:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_  
Street Suite City State Zip

**Position Held:** \_\_\_\_\_ / **Annual or Monthly Salary:** \_\_\_\_\_ / **Date Started:** \_\_\_\_\_

**Supervisor's Name:** \_\_\_\_\_ / **Supervisor's Phone #:** \_\_\_\_\_

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**Emergency Contact**

**Name:** \_\_\_\_\_ / **Phone#:** \_\_\_\_\_ / **Relationship:** \_\_\_\_\_

**Address:** \_\_\_\_\_

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I certify that all information contained herein is true and I authorize management/landlord to verify all information listed on this application. I authorize landlord/management to obtain a consumer report from a credit agency and pursue any other information it deems necessary to best evaluate my application; I understand this may include criminal background checks, rental history, employment information and any other necessary information.

The applicant releases landlord/management company from any liability in the event this is rejected due to credit information or verifications performed.

In compliance with federal fair housing regulation, this property shall be made available to all persons without regard to race, color, religion, national origin, sex, familial status, physical or mental handicaps, or any additional protected classes specified by federal law.

**Applicant's Signature:** \_\_\_\_\_ / **Date:** \_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_ / **Date:** \_\_\_\_\_

**GUARANTOR / CO-SIGNER APPLICATION**

Date: \_\_\_\_\_

Tenant's Name \_\_\_\_\_

Apartment Address \_\_\_\_\_ Apt.# \_\_\_\_\_

Co-signer Name: \_\_\_\_\_ Relationship to tenant \_\_\_\_\_

Co-signer Address: \_\_\_\_\_  
Street address, \_\_\_\_\_ city, state, zip code

Co-Signer SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Co-signer Home Phone: \_\_\_\_\_, Co-signer Cell Phone \_\_\_\_\_

Co-Signer's email address \_\_\_\_\_

Co-signer's Employer Co. \_\_\_\_\_ Position \_\_\_\_\_

Work Address \_\_\_\_\_

Supervisor \_\_\_\_\_ Annual Income \$ \_\_\_\_\_  
Name & phone number

Please list any other form of income you may have and the amount  
Please complete one:

\_\_\_\_\_ Own Home dates of current occupancy \_\_\_\_\_ to \_\_\_\_\_ Monthly Mortgage \$ \_\_\_\_\_

\_\_\_\_\_ Rent Home dates of occupancy \_\_\_\_\_ to \_\_\_\_\_ Monthly rent \$ \_\_\_\_\_

I fully understand that by signing this form I am authorizing ***management/landlord*** to check my credit history and credit records. I certify that all information contained herein is true and I authorize management/landlord to verify all information listed on this application. I authorize landlord/management to obtain a consumer report from a credit agency and pursue any other information it deems necessary to best evaluate my application and any other necessary information.

The applicant releases landlord/management company from any liability in the event this application is rejected due to credit information or verifications performed.

In compliance with federal fair housing regulation, this property shall be made available to all persons without regard to race, color, religion, national origin, sex, familial status, physical or mental handicaps or any additional protected classes specified by federal law.

Valid License # or other form of ID \_\_\_\_\_

Name \_\_\_\_\_ Name \_\_\_\_\_  
Print sign

**GUARANTOR/ CO-SIGNER FORM**

***MUST BE NOTARIZED!!!***

TENANT'S NAME \_\_\_\_\_

APARTMENT ADDRESS \_\_\_\_\_ APT. # \_\_\_\_\_

CO-SIGNER'S NAME \_\_\_\_\_ RELATIONSHIP TO TENANT \_\_\_\_\_

AS GUARANTOR, I DO HEREBY GUARANTEE THAT THE ABOVE LISTED LESSEE (TENANT) AT THE ABOVE LISTED ADDRESS WILL FAITHFULLY ABIDE BY THE TERMS AND CONDITIONS OF THE LEASE THROUGH COMPLETION, OR ANY EXTENSION OF AND/OR APARTMENT TRANSFER. I/WE FURTHER GUARANTEE THAT SHOULD THE LESSEE FOR ANY REASON BE UNABLE TO FULFILL HIS/HER OBLIGATIONS OF THIS LEASE AGREEMENT, I/WE WILL UNCONDITIONALLY GUARANTEE HIS/HER RESPONSIBILITIES, INCLUDING PAYMENT OF ALL RENTS AND FEES, UNTIL SUCH TIME THIS LEASE LEGALLY EXIRES, OR TO ANY EXTENSION OF AND/OR APARTMENT TRANSFER.

SIGNED,

GUARANTOR \_\_\_\_\_ DATE: \_\_\_\_\_

NOTARY PUBLIC \_\_\_\_\_ DATE: \_\_\_\_\_

WITNESS \_\_\_\_\_ DATE: \_\_\_\_\_