i	Ë	Ť		
1	ï	Ü		
SOUARE FEET REALTY.LLC				

RENTAL APPLICATION

GOOD FAITH DEPOSIT
Applied toward 1st month rent

Ċ			

			\$		
SQUARE FEET REALTY,LLC			NEW ADI	DRESS:	
ODAY'S DATE:					
10VE-IN DATE:					
				NE COMPLETED APPLICATION R ADULT APLICANT	
1.		APPLICANT INFORMA	BIRTH		
		(Each person over 18 must fill out an applicat	ion)	/ /	
NAME		HOME #		SOCIAL SECURITY No.	
EMAIL					
PRESENT # ADDRESS	STREET	CITY	STATE	ZIP	
LANDLORD		LANDLORD'S TEL #	MONTHLY RENT AMO	OUNT HOW LONG THERE	
PRIVIOUS # ADDRESS	STREET	CITY	STATE	ZIP	
LANDLORD		LANDLORD'S TEL #	MONTHLY RENT AMO	OUNT HOW LONG THERE	
. .		AUTO INFORMATION	I		
DRIVER'S LICENSE No.	STATE	AUTO MAKE	PLATE	YEAR	
i.	Ē	EMPLOYMENT INFORMAT	TION		
PRESENT				HOW LONG	
ADDRESS		PHONE		SUPERVISOR	
POSITION		EARNINGS (W	EEKLY GROSS)		
PREVIOUS				HOW LONG	
EMPLOYER		BUONE		CUDEDVICOD	
ADDRESS		PHONE		SUPERVISOR	

EARNINGS (WEEKLY GROSS)

POSITION

NAME		ADDRESS	STREET		CITY	ZIP
PHONE			RELATIONSHIP			
5.	OCCUPANT INFOR	RMATION	No. of Total	Occupants		
				Godaparito	_	
NAME	AGE			RELATIONS	HIP	
6.	BANK	ING INFO	RMATION			
SAVINGS ACCOUNT BANK	CHECKING ACCOUNT BANK	CREDIT REF	ERENCES			
HAVE YOU EVER BEEN EVIC	TED OR ARE YOU NOW IN	THE PROCESS?	,	YES	NO Date_	
HAVE YOU EVER FILE BANKI	RUPTCY OR BEEN FORECLO	SURED UPON	?	YES	NO Date	
HAVE YOU EVER BEEN CON	VICTED OF A CRIME?			YES	NO Date	
HAVE YOU EVER BEEN REGI	STER AS A SEX OFFENDER?	1		YES	NO Date _	
DO YOU OWN ANY PETS?	YES	NO WI	nat Kind?		How Many?	
	PLEASE REA	AD CAREF	ULLY BEFORE S	IGNING		
 Applicant will pay \$50 a The Landlord will either towards the first month damages by reason of reaso	r accept or reject this apn's rent. If rejected, the	pplication. If deposit will	accepted, the de be returned. The	tenant hereby	waiving any clai	m for
whatsoever for doing se	0.			, ,	J	•
Applicant will pay a \$30Applicant authorizes	0.00 charge for any che		to us. Itain information	relative to cros	tit employment	(nast &
present) residence stat prospective property or	us (past & present), evi	ction, crimir				
. No pets allowed withou . APPLICANT REPRESENT	ut Landlord's prior writt	en consent.		LICATION IS TR	UE & COMPLETE	
Rental Agent (Full Nan	ne)		Applicant's Si	gnature		



RENTAL APPLICATION

GOOD FAITH DEPOSIT Applied toward 1st month rent

\$			

TENANT LIABILITY/ APPLICATION

TENANT-LESSEE		
OWNER:	DATE:	
ADDRESS:		
	MOVE IN DATE:	
	APT:	
	BLDG:	
	FLOOR:	
	<u>AGREEMENT</u>	
	er to remove the above reference apartment ("Apartment") ave paid to as agent for the Owne osit").	_
•	ts you (Tenant) as a tenant and you (Tenant) and Owner (Lai shall be applied to your (Tenant's) obligation under the leas	•
the Apartment, the Deposit shall be r Apartment from the listing of availab	s you (Tenant) as a tenant <u>and</u> you (Tenant) decide not to enteleased to the Owner (Landlord) as consideration for Owneble apartments. By signing below, you (Tenant) agree that the ner for losses the Owner incurred by reason of your (Tenant of available apartments.	r removing the e deposit is
If the Owner (Landlord) rejects ONLY REASON THAT THE DEPOSIT WI	s you (Tenant) as a tenant, the Deposit will be returned to you lead to you lead to you lead to you.	ou. <u>THIS IS THE</u>
ACKNOWLEDGED AND AGREED TO:		
DATE:	Tenant(s) Signature	