

Date: _____ Address Applying for: _____ Last Name: _____

Rent: _____ Deposit _____

No smoking or pets please

RENTAL APPLICATION



RETURN TO:
REGIONAL DEVELOPMENT, LLC 22 WEST 56TH STREET, SUITE 107 PMB 315, KEARNEY, NE 68847 OR CALL: **CHERE 308-627-7528**

First Name: _____ MI: _____ Last Name: _____ Jr.,Sr?

SSN: _____ Date of Birth: _____ Phone: _____ Is this your phone?:

Cell Phone: _____ Pager: _____ Alternate Phone: _____ Whose Phone?:

List your Addresses for the Previous 5 years

Current Address: _____ City, State, Zip: _____

Owner/Manager: _____ Phone: _____ Monthly Rent: _____

Moved In date: _____ Why are you moving? _____

Previous Address: _____ City, State, Zip: _____

Owner/Manager: _____ Phone: _____ Monthly Rent: _____

Moved In date: _____ Moved out date: _____

Previous Address: _____ City, State, Zip: _____

Owner/Manager: _____ Phone: _____ Monthly Rent: _____

Moved In date: _____ Moved out date: _____

Employment and Income

Current Employer: _____ Address: _____

Position: _____ Phone: _____ Hire Date: _____ Hours worked per week: _____

Gross Wages: \$ _____ (___ month ___ week ___ hour) What other income & source?: _____

2nd Job Employer: _____ Phone: _____ Income \$ _____ __wk, __Mon __Hr

Are You on Section 8?: _____ If Yes, Have You had your briefing?: _____ If yes, I have a _____ BEDROOM Voucher

How long will you live here?: ___ 1 yr ___ 2 yr ___ 3 yr + _____ Your Attorney's Name: _____

Is the total move-in amount available now?: _____ Have you broken a lease?: _____ Are You a Convicted Felon?: _____

How many Evictions have been filed on you?: _____ What kind of animals do you have?: _____

What may interrupt your income or ability to pay rent? _____ Do you smoke? _____

If accepted the following persons will be living with me

- | | |
|-----------|-----------|
| 1.) _____ | 4.) _____ |
| 2.) _____ | 5.) _____ |
| 3.) _____ | 6.) _____ |

Credit References

Lender	Purpose of Loan	Balance	Monthly Payment	Do you have a Checking Account?:
1.) _____	_____	_____	_____	Do you have a Savings Account?:
2.) _____	_____	_____	_____	Do you own Real Estate?:

EMERGENCY CONTACTS including help to pay rent

NAME	ADDRESS	PHONE	RELATIONSHIP
1.) _____	_____	_____	_____
2.) _____	_____	_____	_____

LIST Vehicles & Trailers your household will possess: _____

HOW DID YOU FIND THIS HOME: (friend, yard sign, etc.) _____ Your requested move-in date: _____

How much Cash do You Have: \$ _____

Date: _____ Address Applying for: _____ Last Name: _____

Other comments or explanations:

This agreement made this date by and between Chere Wehling., manager for the Owner, hereinafter "Landlord" and the below signed, hereafter "Applicant". The Applicant shall pay to the Landlord nonrefundable fee upon the execution of this agreement in the amount listed on application to cover the administrative costs, expenses, and time of the Landlord to verify information submitted by the Applicant. Applicant authorizes the Landlord, his employees, agents, or representatives to make any and all inquiries necessary to verify the information provided herein, including but not limited to direct contact with Applicant's employer, landlords, credit, neighbors, police, government agencies and any and all other sources of information which the Landlord may deem necessary and appropriate within his sole discretion. The Applicant represents to the Landlord that the application has been completed in full and all the information provided for herein is true, accurate and complete to the best of the Applicant's knowledge and further, agrees that if any such information is not as represented, or if the application is incomplete the Applicant may, at the Landlord's sole discretion, be disqualified. The Applicant provides the information contained on this form. Landlord is not liable to the Applicant, his heirs, executors, administrators, or assigns for any damages of any kind, actual or consequential by reason of the verification by the Landlord of the information provided by the Applicant, and Applicant hereby releases the Landlord, his agent, employees and representatives from any and all actions, causes of action of any kind or nature that may arise by virtue of the execution or implementation of the agreement provided herein. This property requires a **Security Deposit** that must be paid in full before any rental agreement is made. Landlord will attempt to contact the Applicant by the phone numbers listed on this application. Applicant has 24 hours from time of approval to fulfill rental agreement by producing all monies required and signing all rental agreement papers. If Applicant fails to perform within 24 hours of Landlord's approval, Applicant may be disqualified and Landlord may rent this home to the next qualified Applicant.

Our required standards for qualifying to rent an apartment are simple and fair. They are:

- All apartments are offered without regard to race, color, religion, national origin, sex, disability or familial status.
- Each adult occupant must submit an application.
- Your gross monthly income must equal approximately three times or more the monthly rent
- A favorable credit history.
- Be employed and be able to furnish acceptable proof of the required income.
- Good references, housekeeping, and property maintenance from your previous Landlords.
- Limit the number occupants to 2 per bedroom.
- Compensating Factors can include additional requirements such as double deposit or rent paid in advance for applicants who fall short of above criteria.
- It is encouraged that tenants obtain renters insurance.

The Applicant authorizes release of all information to Regional Development, LLC



APPLICANT: _____

DATE: _____

Attached:

1. Copy of Government issued ID and/or student visa. _____
2. Proof of Income (ie. Copy of recent pay stub). _____

OFFICE USE ONLY, Do NOT Write Below This Line				
Received By:	App Fee	Viewed Property	Picture ID Copy	Source