



APPLICATION TO RENT

TENANT  CO-TENANT  GUARANTOR/CO-SIGNOR



Property Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

PERSONAL INFORMATION

Mr.  Mrs. **Marital Status:**  Married  Single  Unmarried  Divorced  Widowed  Separated

First Name: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

Middle Name: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Last Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

AKA /Nickname: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Phone:( ) \_\_\_\_\_ Cell Phone:( ) \_\_\_\_\_ Work:( ) \_\_\_\_\_ Fax:( ) \_\_\_\_\_

Date of Birth: MM/DD/YYYY \_\_\_\_\_ Place of Birth (City, ST, Country) \_\_\_\_\_

OTHER PROPOSED OCCUPANTS (Including Minors) ALL OCCUPANTS OVER 18 YEARS OF AGE OF 18 MUST COMPLETE A SEPARATE APPLICATION

First Name	Middle Initial	Last Name	Relationship	M/F	Social Security Number	Date of Birth

ADDRESS HISTORY (10 Years)

Current Address \_\_\_\_\_ Unit # \_\_\_\_\_  Own  Rent  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_  
From \_\_\_\_ | \_\_\_\_ | \_\_\_\_ To \_\_\_\_ | \_\_\_\_ | \_\_\_\_ Monthly Payment/Rental Amount \$ \_\_\_\_\_  
Landlord/Manager Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Reason for leaving this address \_\_\_\_\_

Previous Address \_\_\_\_\_ Unit # \_\_\_\_\_  Own  Rent  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_  
From \_\_\_\_ | \_\_\_\_ | \_\_\_\_ To \_\_\_\_ | \_\_\_\_ | \_\_\_\_ Monthly Payment/Rental Amount \$ \_\_\_\_\_  
Landlord/Manager Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Reason for leaving this address \_\_\_\_\_

Previous Address \_\_\_\_\_ Unit # \_\_\_\_\_  Own  Rent  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_  
From \_\_\_\_ | \_\_\_\_ | \_\_\_\_ To \_\_\_\_ | \_\_\_\_ | \_\_\_\_ Monthly Payment/Rental Amount \$ \_\_\_\_\_  
Landlord/Manager Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
Reason for leaving this address \_\_\_\_\_

Auto Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic. # \_\_\_\_\_ State \_\_\_\_\_  
Auto Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Lic. # \_\_\_\_\_ State \_\_\_\_\_  
Pets Number & Type: \_\_\_\_\_ Weight: \_\_\_\_\_

**FINANCIAL INFORMATION (Use extra sheet if necessary)**

<del>NAME OF CREDITOR</del>	<del>ACCOUNT NUMBER</del>	<del>MONTHLY PAYMENT</del>	<del>BALANCE DUE</del>

<del>NAME OF BANK BRANCH</del>	<del>ACCOUNT NUMBER</del>	<del>TYPE OF ACCOUNT</del>	<del>ACCOUNT BALANCE</del>

**PERSONAL REFERENCES AND RELATIVES**

NAME	RELATIONSHIP	ADDRESS	PHONE	KNOWN SINCE

**EMERGENCY CONTACT**

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**EMPLOYMENT INFORMATION (Last 10 Years)**

Current Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Position or Title: \_\_\_\_\_  
 Employed Since \_\_\_\_ | \_\_\_\_ | \_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_ Verify Employment: ( \_\_\_\_ )

Previous Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Position or Title: \_\_\_\_\_  
 Employed From \_\_\_\_ | \_\_\_\_ | \_\_\_\_ To \_\_\_\_ | \_\_\_\_ | \_\_\_\_ Monthly Gross Income \$ \_\_\_\_\_  
 Supervisor Name: \_\_\_\_\_ Phone: ( \_\_\_\_ ) \_\_\_\_\_ Verify Employment: ( \_\_\_\_ )

**Have you ever:**     Been Convicted of a Crime?     Been Evicted?     Filed for Bankruptcy?     Broken a Lease?

Applicant represents that statements made are true and correct and hereby authorize verification of references to include but not limited to credit checks, unlawful detainer checks, telecheck and agrees to furnish additional credit references upon request. Applicant agrees to pay for said which is a part of the application process and is charge for the administrative costs of application consideration.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

**We do business in accordance with the FEDERAL FAIR HOUSING LAW (The Fair Housing Amendments Act of 1988). It is illegal to discriminate against any person because of race, color, religion, sex, handicap, familial status, or national origin. Anyone who feels he or she has been discriminated against may file a complaint of housing discrimination by calling the U.S. Department of Housing and Urban Development. 1-800-669-9777**

