

Residential Rental Application Form

Notice: All adult applicants(18 years or older) must complete a separate application for rental

ADDRESS	RENT	START DATE	AGENT/REFERRED BY

APPLICANT INFORMATION

LAST NAME	FIRST NAME	MI	MAIDEN NAME	SSN	DRIVER'S LICENSE #
BIRTH DATE	HOME PHONE		WORK PHONE		EMAIL

CURRENT ADDRESS

STREET ADDRESS		CITY	STATE	ZIP CODE
DATE IN	DATE OUT	LANDLORD NAME		LANDLORD PHONE
MONTHLY RENT		REASON FOR LEAVING		

PREVIOUS ADDRESS

STREET ADDRESS		CITY	STATE	ZIP CODE
DATE IN	DATE OUT	LANDLORDNAME		LANDLORD PHONE
MONTHLY RENT		REASON FOR LEAVING		

OTHER OCCUPANTS

LIST NAMES AND BIRTH DATES OF ALL ADDITIONAL OCCUPANTS 18 YEARS OR OLDER
LIST NAMES AND BIRTH DATES OF ALL OCCUPANTS 18 YEARS OR YOUNGER

PETS

PETS?	DESCRIBE:

EMPLOYMENT & INCOME INFORMATION

1. OCCUPATION	EMPLOYER/COMPANY	MONTHLY SALARY	
SUPERVISOR NAME	SUPERVISOR PHONE NUMBER	START DATE	END DATE

2. OCCUPATION		EMPLOYER/COMPANY		MONTHLY SALARY	
SUPERVISOR NAME			SUPERVISOR PHONE		END DATE
1. OTHER INCOME DESCRIPTION			MONTHLY INCOME		START DATE
2. OTHER INCOME DESCRIPTION			MONTHLY INCOME		

BANKING AND CREDIT CARD INFORMATION

BANKING INSTITUTION	CHECKING/SAVINGS	ACCOUNT NUMBER
BANKING INSTITUTION	CHECKING/SAVINGS	ACCOUNT NUMBER
CREDIT CARD TYPE	CHECKING/SAVINGS/OTHER	ACCOUNT NUMBER

EMERGENCY CONTACT

1. NAME	ADDRESS	PHONE	RELATIONSHIP
2. NAME	ADDRESS	PHONE	RELATIONSHIP

PERSONAL REFERENCES

1. NAME	ADDRESS	PHONE	RELATIONSHIP
2. NAME	ADDRESS	PHONE	RELATIONSHIP
3. NAME	ADDRESS	PHONE	RELATIONSHIP

BACKGROUND INFORMATIONHAVE YOU EVER? :

FILED FOR BANKRUPTCY?	WILLFULLY OR INTENTIONALLY REFUSED TO PAY RENT WHEN DUE?
BEEN EVICTED FROM A TENANCY OR LEFT OWING	IF YES, PLEASE PROVIDE PROPERTY NAME, CITY, STATE, AND LANDLORD NAME.
BEEN CONVICTED OF A CRIME?	IF YES, PLEASE PROVIDE TYPE OF OFFENSE, COUNTY, AND STATE.

VEHICLE INFORMATION

MAKE & MODEL	YEAR	LICENSE NO & STATE
MAKE & MODEL	YEAR	LICENSE NO & STATE
OTHER VEHICLES		

OTHER INFORMATION

HOW DID YOU HEAR ABOUT THIS PROPERTY?
PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUATE THIS APPLICATION.

PLEASE READ AND INITIAL

_____ I declare the foregoing information is true and correct, and I hereby authorize _____ and/or its agents, to conduct an employment check, to verify our references and to do credit and background checks.

Applicant's Signature

Date

Applicant's Signature

Date

S&J Riverside, LLC
148 Blue Lakes Blvd. N. #308
Twin Falls, ID 83301
208-404-8202
jeremy@realestatetwinfalls.com

Credit Card Authorization Form

Cardholder Information

Name: _____

Billing Street Address: _____

City: _____ State: _____ Zip Code: _____

Country: _____ Email: _____

Address: _____

Direct Telephone: __ (____) _____

I hereby affirm that I am the owner of the below referenced credit card and that name is listed on the front of the credit card.

I hereby authorize S&J Riverside, LLC to charge my credit card listed below in the amount of \$_____ for the payment for late or missed rent, late fees, and/or park fees plus a 3% convenience fee will be charged the day after rent is late.

Account Holder's Signature

Credit Card Information

Credit Card Type: ___ Mastercard ___ Visa ___ American Express ___ Discover

Number: _____

Expiration Month: _____ Expiration Year: _____ Security Code: _____

Cardholder Signature: _____ Date: _____