

Rental Application

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Applicant:		Birt	th Date:		Social Securit	y #:
Make/Model Car	`	Year	Drivers L	_icense #		State Issued
Phone: (home)		(work)			_ (cell)	
Email:						
Spouse:		Birt	h Date:		Social Securit	y #:
Make/Model Car	·	Year	Drivers L	_icense #		State Issued
Phone: (home)		(work)			_ (cell)	
Email:						
YOUR RESIDENCE H				RS:		
Current address:					Mo Rent S	\$ How Long
Street	С	ity	State	Zip		\$ How Long
Landlord:						
Previous address:	4	01		7	_ Mo Rent \$ _	How Long
		_ Phone:		_ Reason to	rieaving:	
YOUR CURRENT EM						
						HOW LONG?
						Phone:
Position:	Gross S	Salary \$	week	/mo/yr Su	pervisor:	
(If employment is less than	6 months, give name, a	ddress and p	phone of prev	ious employe	r or school)	
Name S	treet		City	State	Zip	Phone
SPOUSE'S CURREN			ony	Cluto	<u>–</u> ,p	1 Hono
		Self Employ	, hav	Student	Potirod	HOW LONG?
						Phone:
						person who we could contact for
information (banker, additio	nal employer, etc.). You	u do NOT ha	ive to reveal a	alimony, child	support, or spo	use's annual income unless you
want us to consider it in this	application.	Amount: \$ _				
Name Stre	eet		City	State	Zip	Phone
BACKGROUND INFO	RMATION: (Please	complete	ALL inform	ation below	or application	on cannot be processed)
Have you or any occup	ants <u>ever</u> been conv	victed, arres	sted, put on	probation or	had adjudica	tion withheld or deferred for a
felony offense? Ye	s No; If yes, wher	n & explain				
Ever filed for bankruptcy	? If yes, when? _		Eve	r been evicte	d? If yes,	when?
						roperty as a short sale
						size):
						ental Application, if unmarried

Total # of occupants:	Number of adults:	Names of children under 18:	

Make/Model/Year of any other vehicles permanently on premises _____

Additional information to help evaluate this application:

I certify that the above information is correct and complete and hereby give authorization to make any inquiries you feel necessary to evaluate my tenancy. I understand that the information obtained may be communicated among employees or agents of the management company receiving this report. If I rent the property, I understand that the information gathered from this application and the Rental Agreement may be maintained by Management and the consumer reporting agency involved for up to five (5) years after I vacate the premises.

I UNDERSTAND THAT IF ALL BLANKS ARE NOT FILLED IN, THIS APPLICATION WILL BE REJECTED.

APPLICANT'S SIGNATURE DATE SPOUSE'S SIGNATURE DATE In case of emergency, notify: Phone: Relationship: Address:

I hereby apply to lease the described premises for the term and conditions set forth, and agree that the rental is to be payable on the FIRST day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true. I hereby authorize a credit check and verification of all information provided. I authorize and instruct any person or consumer reporting agency to compile and furnish any information it may have or obtain in response to such credit inquiries.

I hereby deposit \$_______as holding funds/first month's rent which will be refunded to me if this application is not accepted within _______business banking days unless I have made a misrepresentation or false statement of fact in this application. Upon the refund of my deposit, I hereby waive any claim to damages by reason of non-acceptance, understanding that the owner or his agent may reject this application without stating any reason for doing so. In all events I understand that I am being charged a NON-REFUNDABLE application processing fee of \$50 per person.

Upon acceptance of this application, this deposit will be retained as the first month's rent. If so approved and accepted, I agree to execute a lease for ______ months before possession is given and to pay the security deposit at the time of signing the lease. If I make a misrepresentation or false statement of facts, or if I fail to execute a lease as previously required, the first month's rent will be forfeited as liquidated damages in payment for the owner's and agent's time and effort in reserving the unit, and in processing my inquiry and application, including making necessary investigation of my credit, character, and reputation.

I RECOGNIZE THAT AS A PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT MAY BE PREPARED WHEREBY INFORMATION IS OBTAINED THROUGH PERSONAL INTERVIEWS WITH MY NEIGHBORS, FRIENDS, AND OTHERS WITH WHOM I MAY BE ACQUAINTED. THIS INQUIRY INCLUDES INFORMATION AS TO MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. I UNDERSTAND THAT I MAY HAVE THE RIGHT TO MAKE A WRITTEN REQUEST WITHIN A REASONABLE PERIOD OF TIME TO RECEIVE ADDITIONAL INFORMATION ABOUT THE NATURE AND SCOPE OF THIS INVESTIGATION. **IT SHOULD BE NOTED THAT ANY CREDIT REPORTING INFORMATION CANNOT BE SHARED WITH THE APPLICANT** AND IS ONLY UTILIZED WITH OTHER PERTINENT INFORMATION FOR RENTAL PURPOSES ONLY TO DETERMINE CREDIT WORTHINESS OF APPLICANT.

I understand that I am being charged a NON-REFUNDABLE credit application fee of \$50 per adult. ALL FUNDS MUST BE IN THE FORM OF CASH, CASHIER'S CHECK, MONEY ORDER, OR WIRED MONIES (applicant will be assessed a \$18 wire fee per transaction)

PROPERTY ADDRESS:		MONTHLY RENT:			
Referred by:					
Agent		Office	Phone		
Date of possession:	Monthly rent: \$				
Application Fee: \$50/per person Rents Payable: Sales Tax:	Lease Fee: Pet Fee: Payments Re	\$60 c'd:	Security Deposit: Other: Balance Due:		
PROPERTY IS BEING RENTED IN	AS-IS CONDITIO	ON UNLESS OTHERWIS	E AGREED TO IN WRITING.		
Signature of Applicant	Date	Signature of Spouse	Date		

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FOR OFFICE USE ONLY									
Deposit of \$	Received by		_ Date						
Application Fee of \$	Received by		Date						
REFERENCE VERIFICATION NAM									
COMMENTS:									
This application is Approved	Rejected By			Date					
Reason for rejection:									
Applicant notified by		Date	Verbally	In Writing					
This application is Approved _ Reason for rejection:	Rejected By		Verbally						