

APPLICATION FOR APARTMENT

<u>APPLICANT</u>	<u>APPLICANT</u>
Name: _____	Name: _____
Address: _____	Address: _____
City: _____ Zip: _____	City: _____ Zip: _____
Phone #: _____	Phone #: _____
Social Security #: _____	Social Security #: _____
Date of Birth: _____	Date of Birth: _____
Employer: _____ How Long: _____	Employer: _____ How Long: _____
Address: _____ Zip: _____	Address: _____ Zip: _____
Phone #: _____ Supervisor: _____	Phone #: _____ Supervisor: _____
Position: _____ Yearly Salary: _____	Position: _____ Yearly Salary: _____
Adults: _____ Number of Children: _____	Adults: _____ Number of Children: _____
Name & Ages Of Children That Will Live In Apartment	
Name: _____ Age: _____	Name: _____ Age: _____
Name: _____ Age: _____	Name: _____ Age: _____
Name: _____ Age: _____	Name: _____ Age: _____

NO OTHER INDIVIDUALS ARE PERMITTED IN THE APARTMENT BY LAW - NO PETS ALLOWED

Present Landlord: _____
 Phone #: _____ How Long: _____
 Reason For Leaving: _____
 Have You Ever Rented From Shamco Mgmt.: _____
 When: _____
 Prior Landlord: _____
 Phone #: _____ How Long: _____
 How Did You Hear Of Shamco Mgmt: _____

Business Reference: _____
 Address: _____
 Phone # _____

Personal Reference: _____
 Address: _____
 Phone # _____

Bank Reference: _____
 Address: _____
 Phone # _____
 Driver's License: _____ State: _____

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 Phone # _____

Bank Reference: _____
 Address: _____
 Phone # _____
 Driver's License: _____ State: _____

It is understood that this application in no way binds the Landlord to the renting of an apartment. A Credit Report and a Past Eviction Report are herewith authorized in connection with our Apartment Application request along with the **Non-Refundable Fee of \$50.00**. The application will be processed on the basis of a fully completed application first and processing will not begin until full deposit is received. A deposit of \$_____ in the form of a Bank or Postal Money Order will be left for the apartment indicated below, and it is agreed that I / we agree to forfeit said deposit if I / we decide to withdraw reservation for said apartment. All security money, plus a signed lease, must be received by the office five (5) days prior to move in date.

NOTE: APPLICANT MUST PROVIDE COPIES OF VALID DRIVERS LICENSE (WITH PHOTO), SOCIAL SECURITY CARD, CURRENT EMPLOYMENT PAYSTUBS AND/OR RECENT TAX RETURNS. ONLY BANK OR POSTAL MONEY ORDERS WILL BE ACCEPTED.

Applicant _____ Date _____ Applicant _____ Date _____

Building # _____ Rent Deposit: _____ Date Received: _____ Deposited: _____ Approved: _____

APT #: _____ Tenant Notified of Acceptance: _____ Amount of Security: \$ _____ Date Received: _____

Lease To Tenant: Given _____ Mailed _____ Tenant Returned Signed Lease _____

CREDIT REPORT:

Applicant Signature _____ Date _____