



Urban Pharm, LLC

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E-mail: contact@urbanpharm.com

Application for Occupancy with Urban Pharm

Address Applying for:
How did you hear about Urban Pharm? (Circle)
Craigslist Radio GR Press Flyer Referral, Who? Other:
Background-
First Name:
Date of Birth:
Drivers License/State ID#: State:
Primary Phone #: Work/Secondary Phone #:
Email Address:
Have you ever filed for bankruptcy? (Circle) YES NO Had a foreclosure or eviction? (Circle) YES NO
Explanation:
Car Year: Car Make: Car Model: Car Color:
License Plate #:
Assets (Savings, Checking, Investments): \$ Description:
Do you have any pets? YES NO Type/Breed/Age:
Do you smoke? YES NO (note: we do not discriminate against smokers, but you must be willing to smoke outside
Have you ever been convicted of a misdemeanor or felony crime? YES NO
Explanation of crime(s):
Housing-
Current Address: City/State/Zip:
How long have you lived there?
Reason for Leaving?

Who is your landlord?	Phone:		
Would your landlord give a good reference? (Circle)	YES NO		
If not, why?			
Previous Address:	City/State/Zip:		
How long have you lived there?			
Reason for Leaving?			
Employment and Income-			
Are you currently employed?(Circle) YES NO If not	, what is your source of income?		
Where are you employed?	Length of time on job:		
What is your position? S	upervisor:P	hone:	
What is your gross monthly income? \$	Can you prove this with paystub	s or tax returns? (Circle) YES NO	
Proposed Occupants-			
Name	Relationship	Age	
	lease Read Below		
By turning this application in, it <u>does not</u> reserve are ready to move-in requires part/all of the sec up to 30 Days with a minimum of \$100 per week forfeited if a lease is not activated within this 30 Urban Pharm will return deposi	urity deposit to be paid. Urban F towards the security deposit. H day time period.	Pharm can hold a property for lowever, \$100 per week will be	
Would you like to put money down towards you	r house? (Circle) Yes No	How Much?	
Please include a \$20.00 application fee who be processed without it. The application fe		n. Your application will not	
Furthermore, I authorize Urban Pharm, LLC and rent/mortgage history.	to review my credit profile a	nd verify any employment	

Signature

Date

Printed Name