RESIDENTIAL LEASE APPLICATION

Landlord/Lessor:				Date of Application:
Location of Residence:				
Name of Tenant:				Conditions and Information
Other Names Tenant has used:				
Current Home Phone Number:	0			All pages of this lease application must be
	rivers License No. State of Issuance:			signed by all persons who will sign the lease agreement. Additional tenant information is
Social Security Number: Date of Birth:				on page 2.
Marital Status:	Spouse Name:			
Children Names:				The completing of this application by Tenant and the acceptance of this application by Landlord creates no obligation of Landlord to approve the application.
Name of Tenant #2:				
Current Phone No:				
SS# Tenant #2:				This
Who will live in residence except applicant and children?				This application will be approved or rejected usually within five (5) days of being
Place of Employment:				submitted to landlord. However, there is no obligation of Landlord to notify tenant
Address:				unless the application is approved.
Supervisor:	Phone:			
Your Job Title:	Work Hours:			If this application is approved, Tenant must make the security deposit and sign the
Monthly Pay:	How long at curren	t job?		lease before the tenancy begins.
Other sources of income:				
				Landlord complies with all Federal and State laws regarding discrimination and does not
Do you intend to reside here indefi	nitely?	Yes	☐ No	discriminate based upon age, sex, race,
-If no, how long?				marital status, religion, national origin, or
Have you ever filed Bankruptcy?		Yes	☐ No	other prohibited classifications.
-If yes, court and cause number?				
Are you a party to any lawsuit?		Yes	☐ No	
-If yes, please describe.				
Are there any judgments against y	ou?	Yes	☐ No	For Landlord's Use Only
-If yes, please describe.				Rent Amount:
				Deposit:
Bank Name:	Phone:			Date Lease to begin:
Account No: Account No				End of Lease:
Credit References:				Number of Occupants:
Name:	Phone:			
Name:	Phone:			
Name:	Phone:			
(0	Continued on Page 2)			
	gree that the information	on discl	osed by you	erein is true, complete and accurate to the herein is material to the potential Lessor's ease.
Signed:				Date:
Signed:				Date:

Do you have -If yes, pleas	any pets that you would like to occu	upy the residence?	s 🗌 No			
Note: This p	rovision does not imply that pets are er been evicted from a rental unit?		provide reason for eviction.			
,		,				
Motor Vehicle	e Identification:					
Year	Make/Model	Color	Tag Number			
List Credit Ca	rds					
Type:	Card #	Type:	Card #			
Type:	Card #		Card #			
Creditors	Type Of Debt	Amount Owed	Monthly Payment			
		-				
	ify in case of emergency:	Phone: _				
Present Addres			Zip:			
How long?	Reason for leaving:					
Previous Addre	ne # of owner/manager:					
When?	Reason for leaving:					
Previous Addre						
When?	Reason for leaving:					
	OF MANAGER:					
The Manager	of the Premises is	Phone:				
Address:						
City:	State:	Zip:				
OWNER DISCLOSURE: The owner of the premises or a person authorized to act for and on behalf of the owner for the purpose of service of process and receiving and receipting for notices and demands is disclosed as:						
purpose of se Name:	ervice of process and receiving and re	eceipting for notices and de Phone:	mands is disclosed as:			
Address:		Pilolie:				
City:	State:	7in·				
	State.	2ιρ.	_			
RADON GAS DISCLOSURE. Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal and state guidelines have been found in buildings in every State of the United States. Additional information regarding radon gas may be obtained from your County public health unit.						
See also http:	//www.epa.gov/iaq/radon/					
CONSENT TO CREDIT CHECK						
I/We,, the undersigned applicant(s) authorize landlord,, or his/her/their agent to order and review my/ our credit and criminal history and investigate the accuracy of the information contained in the application. I/We further authorize all banks, employers, creditors, credit card companies, references, and any and all other persons to provide to Landlord any and all information concerning my/our credit.						
Signed:			Date:			
Signed:			Date:			