



1624 Bonforte Blvd, Suite B • Pueblo, Colorado 81001
 Office: 719-544-4492 • Fax: 719-545-4558
 Email: rentalsolutionspueblo@hotmail.com • Web: www.canonland.com

RENTAL APPLICATION

TODAY'S DATE _____ ADDRESS APPLIED FOR _____

APPLICANT'S INFORMATION

LAST NAME _____ FIRST _____ MI _____ JR/SR _____

SS# _____ DATE OF BIRTH _____ PHONE # _____

CURRENT ADDRESS _____

Street City State Zip

How Long at Current Address _____

Landlord or Mortgage Co. _____ Phone # _____

Reason for leaving _____ Amount of Payment _____

Previous Address _____

Street City State Zip

How Long at Previous Address _____

Landlord or Mortgage Co. _____ Phone # _____

Reason for leaving _____ Amount of Payment _____

EMPLOYMENT STATUS

___ Full Time ___ Part Time ___ Unemployed ___ Student ___ Retired

Employed by _____ How long have you worked there _____

Address _____ Phone # _____

Position _____ Supervisor _____

Monthly Income _____ Supervisor _____

Other Source of Income _____ Amount _____ Source _____

PLEASE LIST NAME OF CONTACT PERSON(S) AND PHONE NUMBERS OF YOUR OTHER SOURCE OF INCOME _____

CO-APPLICANT'S INFORMATION

LAST NAME _____ FIRST _____ MI _____ JR/SR _____

SS# _____ DATE OF BIRTH _____ PHONE # _____

CURRENT ADDRESS _____

Street City State Zip

How Long at Current Address _____

Landlord or Mortgage Co. _____ Phone # _____

Reason for leaving _____ Amount of Payment _____

Previous Address _____

Street City State Zip

How Long at Previous Address _____

Landlord or Mortgage Co. _____ Phone # _____

Reason for leaving _____ Amount of Payment _____

EMPLOYMENT STATUS

___ Full Time ___ Part Time ___ Unemployed ___ Student ___ Retired

Employed by _____ How long have you worked there _____

Address _____ Phone # _____

Position _____ Supervisor _____

Monthly Income _____ Supervisor _____

Other Source of Income _____ Amount _____ Source _____

PLEASE LIST NAME OF CONTACT PERSON(S) AND PHONE NUMBERS OF YOUR OTHER SOURCE OF INCOME _____

Names of Other Residents Date of Birth Relationship to You

Rental Solutions and property owners reserve the right to not accept certain breeds of dogs.

Do you have pets? _____ If so, how many? _____

Breed _____ Type _____

ADDITIONAL INFORMATION

Applicant's Drivers License # _____ State _____ Expiration Date _____

Co- Applicant's Drivers License # _____ State _____ Expiration Date _____

VEHICLES

Auto Make _____ Year ____ Color _____ Tag # _____ State ____

Auto Make _____ Year ____ Color _____ Tag # _____ State ____

Additional Vehicles _____

CREDIT INFORMATION

BANK (1) _____

ADDRESS _____

ACCOUNT # _____

BANK (2) _____

ADDRESS _____

ACCOUNT # _____

IN CASE OF EMERGENCY

Applicant's Nearest Living Relative _____ Phone # _____

Address _____ Relationship _____

Co- Applicant's Nearest Living Relative _____ Phone # _____

Address _____ Relationship _____

.....
We understand that a credit report will be ordered in conjunction with this rental application. In the event any derogatory, inaccurate or unverifiable information is listed above or on our credit report, we understand that our application to rent may be turned down by Rental Solutions. In our procedure for processing your application, an investigative police report will be run. The total cost for the police and credit report will be \$25.00. If there are more than one applicant (for example, roommates) the cost is \$25.00 per applicant for the credit report. These inquires include information as to your character, general reputation, personal characteristics and mode of living.

NOTICE: Applicant is advised that Rental Solutions is employed by and acting as agent for the owner. In the event more than one applicant is received for the same property, the more qualified applicant will be offered a lease on the property.

Applicant Date

Applicant Date

DO NOT WRITE BELOW THIS LINE (OFFICE USE ONLY)

.....
Monthly Rent _____

Approved By _____

Possession Date _____

Approval Date _____



1624 Bonforte Blvd, Suite B • Pueblo, Colorado 81001
Office: 719-544-4492 • Fax: 719-545-4558
Email: rentalsolutionspueblo@hotmail.com • Web: www.canonland.com

Date _____

I, (We) _____

Hereby authorize Rental Solutions to pull up a new police and credit report in my (our) name(s). The cost of the report is a non-refundable **\$25.00** fee, per applicant, which will be at my (our) expense. Further, I (we) agree that the report is to be used only by Rental Solutions.

Signature

Signature



1624 Bonforte Blvd, Suite B • Pueblo, Colorado 81001
 Office: 719-544-4492 • Fax: 719-545-4558
 Email: rentalsolutionspueblo@hotmail.com • Web: www.canonland.com

CREDIT REPORT INFORMATION

NAME: _____
 First Middle Last

SOCIAL SECURITY # _____ BIRTH DATE: _____

NAME: _____
 First Middle Last

SOCIAL SECURITY # _____ BIRTH DATE: _____

ADDRESS _____
 Street City State Zip

PREVIOUS ADDRESS (if less than 2 years)

 Street City State Zip

By signing the below, I (we) authorize Rental Solutions to make inquires through the credit bureau.

_____ Date _____

_____ Date _____



1624 Bonforte Blvd, Suite B • Pueblo, Colorado 81001
Office: 719-544-4492 • Fax: 719-545-4558
Email: rentalsolutionspueblo@hotmail.com • Web: www.canonland.com

Dear Employer/Supervisor:

Please assist us in the Verification of Employment of the application below. If you have any questions, please call 719-544-4492. Thank You!

Name of Applicant(s): _____

Date of Employment: _____

Employer & Person Contracted: _____

Salary: Hourly \$ _____ Weekly \$ _____ OR Monthly \$ _____

Any Comments: _____

Employer/Supervisor Signature

Date

Applicant represents all information in the Application to be true and accurate and authorizes owner/manager and his/her/its employees and agents to verify said information in person, by mail, phone, fax or otherwise, to determine Applicant's rental, credit, financial, and character standing. Applicant hereby releases owner/manager, his/her/its employees and agents, the credit reporting agency, its employees and agents, and any and all other firms or persons investigating or supplying information, from any liability whatsoever concerning the releases and/or use if said information and further, will defend and hold them all harmless from any suit or reprisal whatsoever. All holder, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning Applicant and in so doing, will be acting on Applicant's behalf at Applicant's request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original.

Date

Applicant's Signature

Applicant's Name PRINTED

Date

Applicant's Signature

Applicant's Name PRINTED



1624 Bonforte Blvd, Suite B • Pueblo, Colorado 81001
 Office: 719-544-4492 • Fax: 719-545-4558
 Email: rentalsolutionspueblo@hotmail.com • Web: www.canonland.com

Dear Property Owner/Manager:

Please assist us in the Verification of Residency of the applicant below. If you have any questions, please call 719-544-4492. Thank You!

Name of Applicant(s): _____

Previous Residency: _____

How Long at the Above Address: _____

Amount of Monthly Rent: _____

Was Rent Paid on Time: Yes No

Any NSF's: Yes No

Any Late Payments: Yes No

Any 3 or 10 Day Notices: Yes No

Did They Give Proper Notice: Yes No

Any Complaints: Yes No

Would you re-rent: Yes No

Comments: _____

 Property Owner/Manager Signature

 Date

Applicant represents all information in the Application to be true and accurate and authorizes owner/manager and his/her/its employees and agents to verify said information in person, by mail, phone, fax or otherwise, to determine Applicant's rental, credit, financial, and character standing. Applicant hereby releases owner/manager, his/her/its employees and agents, the credit reporting agency, its employees and agents, and any and all other firms or persons investigating or supplying information, from any liability whatsoever concerning the releases and/or use if said information and further, will defend and hold them all harmless from any suit or reprisal whatsoever. All holder, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning Applicant and in so doing, will be acting on Applicant's behalf at Applicant's request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original.

 Date

 Applicant's Signature

 Applicant's Name PRINTED

 Date

 Applicant's Signature

 Applicant's Name PRINTED