

RENTAL APPLICATION

FOR OFFICE USE ONLY
_____AGENT ____

DATE ______ AGENT _____

COMMUNITY _____ RENT \$ _____

The undersigned hereby makes app	lication to rent apartment numb	oer	located at _	
beginning on	_ ending on	, at a monthly rental of \$		
PLEASE TELL US A	BOUT YOURSELF			
NAME OF APPLICANT			Phone ()
Social Security No	Driver's	Lic. No. & State		_ D.O.B
NAME OF APPLICANT			Phone ()
Social Security No	Driver's Lic. No. & State			_ D.O.B
List All Occupants and Date of Birt	h			
PLEASE GIVE YOUR	CURRENT RESID	ENCE		
APPLICANT CURRENT ADDRESS				Zip Code
Month & Year Moved In	Reason for Leaving			
Owner or Agent	Phone	()	Monthly Pa	yment \$
APPLICANT CURRENT ADDRESS				Zip Code
Month & Year Moved In	Reason for Leaving			
Owner or Agent	Phone	()	Monthly Pa	yment \$
PLEASE GIVE YOUR	EMPLOYMENT IN	FORMATION	Income Verification Re	quired
APPLICANT CURRENT EMPLOYE	R (Or Most Recent)			
Address				
Date(s) Employed / From	To	Position		
Supervisor	Your Net Monthly Salary \$		_ Household Net Monthy Ir	come \$
APPLICANT PREVIOUS EMPLOYE	ER (Or Most Recent)			
	,)
Date(s) Employed / From				,
Supervisor				
If there are other sources of income you we You do NOT have to reveal alimony,	·	·		
Amount \$	Source			

LOYER (Or Most Recent)			
		Phone ()	
To	Position		
Your Net Monthly Salary \$	ary \$ Household Net Monthy Income \$		
PLOYER (Or Most Recent)			
		Phone ()	
To	Position		
Your Net Monthly Salary \$	Househo	old Net Monthy Income \$	
u would like us to consider, please list incor	me, source and person (Banker,	Employer, etc.) who we could contact	for confirmation.
ny, child support or spouse's annual incom	ne unless you want us to conside	rit in this application.	
Source			
R BANK AND CREDIT	REFERENCES (A	PPLICANT/	
City-State/Branch		Telephone	
City-State/Branch		Telephone	
(Including Company Vehicles)			
		Tag No./State	
		•	
owed			
• •		-0	
	•		
that might help management evalua	te your application:		
about your application, please give y	our contact information whe	re you can be located:	
, , , , , , ,		•	
Night	Phone:		
Phone: Email Address:			
Niaht	Phone:		
	To		City-State/Branch City-State/Branch City-State/Branch Telephone City-State/Branch

IN CASE OF PERSONAL EMERGENCY, NO	OTIFY:
Full Address:	Work Phone:
that the rental is to be payable the 1st day of each to the agent to accept this application I warrant that made above be a misrepresentation or not a true	I premises for the term and upon the conditions above set forth and agree th month in advance. As an inducement to the owner of the property and at all statements above set forth are true; however, should any statement e statement of fact the owner or his agent may reject, without stating any g any claim for damages by reason of non-acceptance. I hereby deposit a at of \$20.00.
the amount of \$500.00 in the form of a money ord a twelve (12) or sixteen (16) month lease for the a	nree (3) business days to submit a NON-REFUNDABLE "Holding Fee" in der, which will be applied towards the first month's rent. If I fail to execute above described premises, the "Holding Fee" will be forfeited as liquidated ort in processing my inquiry and application, including making necessary on.
criminal record background check may be pre- with my neighbors, friends, and others with wh character, general reputation, personal charact	er processing my application, an investigative consumer report and a epared whereby information is obtained through personal interviews from i may be acquainted. This inquiry includes information as to my teristics, and mode of living. I understand that i may have the right to iod of time to receive additional, detailed information about the nature
The above information, to the best of my knowled	ge, is true and correct.
Signature of Applicant	Date Signed
Signature of Applicant	Date Signed