

Rental Application

Name: _____ Soc. Sec. # _____ DOB: ___/___/___
Name: _____ Soc. Sec. # _____ DOB: ___/___/___
Current Address: _____ Telephone: () _____
City: _____ State: _____ Zip Code: _____
Name of Apartment Community: _____
Person Paid Rent to: _____ Telephone: () _____
Reason for Moving: _____
Monthly Payment: \$ _____ From: ___/___/___ To: ___/___/___
Previous Address: _____ Telephone: () _____
City: _____ State: _____ Zip Code: _____
Name of Apartment Community: _____
Person Paid Rent to: _____ Telephone: () _____
Reason for Moving: _____
Monthly Payment: \$ _____ From: ___/___/___ To: ___/___/___
Additional Occupants: 1) _____ 2) _____ 3) _____
Occupants DOB: 1) _____ 2) _____ 3) _____

<u>Stonecastle Apartments</u>
Date of App. _____
Apt. No. _____
Type: _____
Rental Amt. \$ _____
Move-in Date: _____
Sec. Dep. \$ _____
Admn. Fee \$ _____
Pet Fee \$ _____
Pet Dep. \$ _____
Lease Term _____
Transfer Fee \$ _____
Application Fee \$ _____
Approval: _____

Type of Pet: _____ Breed: _____ Weight: _____ Age: _____
Year/Make/Model/Color: 1) _____ 2) _____
Driver's License #: 1) _____ State: _____ 2) _____ State: _____
How were you referred to us?

EMPLOYMENT DATA

CURRENT Employer: _____ Address: _____
City: _____ State: _____ Telephone: () _____ ext. _____
Position: _____ Supervisor: _____ Gross Monthly Income: \$ _____
PREVIOUS Employer: _____ Address: _____
City: _____ State: _____ Telephone: () _____ ext. _____
Position: _____ Supervisor: _____ Gross Monthly Income: \$ _____
SPOUSE Employer: _____ Address: _____
City: _____ State: _____ Telephone: () _____ ext. _____
Position: _____ Supervisor: _____ Gross Monthly Income: \$ _____
PREVIOUS Employer: _____ Address: _____
City: _____ State: _____ Telephone: () _____ ext. _____

EMERGENCY CONTACT: _____ Telephone: () _____

This is to inform you that as a part of our procedure for processing your application, an investigative Consumer Report may be prepared where by information is obtained through personal interviews with your landlord, employer, or others with whom you are acquainted. I/we make application for residency at Stonecastle and deposit herewith the amounts of \$ _____ as a good faith deposit, \$ _____ as an application fee, and \$ _____ as a non-refundable administration fee. I/we also understand that in the event that I change my mind once I have left my good faith deposit with the leasing office that I/we are no longer entitled to any refund of good faith deposit. Application fee is not refundable at any time. I/we strictly adhere to the move-in date chosen at the time of application and if I/we are unable to move-in on the specified date, I/we will be held responsible for the rent due from the original date forward. Owner and/or agent for the owner reserves the right to reject this application and to refuse possession of the above-mentioned accommodation. I/we have read the foregoing, certify that the information herein is TRUE and CORRECT, that this application is submitted for the purpose of inducing approval of this application in my/our behalf. Have you or your spouse/roommate ever been sued for non-payment of rent or for damages to rental property? If so, please explain the situation: _____
I affirm that all the information on this application is true, accurate, complete, and correct and I/we agree that if this is not so, my application will be held in default and I may be subject to eviction.

I hereby consent to allow Stonecastle, through its designated agent and its employees, to obtain and verify my credit information for the purpose of determining whether or not to lease an apartment to me. I understand that should I lease an apartment, Middlebrook Farms, and its agent shall have the continuing right to review my credit information, rental application, payment history and occupancy history for account review purposes and for improving review methods.

Signature of Applicant _____
Date

Signature of Applicant _____
Date