



1-800-388-2335 FAX: 1-800-766-5331
 FOR MEMBER/RENTAL MANAGEMENT USE ONLY
 Full Express Credit Only

Non-Refundable \$ _____
 Screening Fee _____

Total Due \$ _____

Date _____ Member# _____ MemberName _____ Phone# _____ Fax# _____

I _____ have checked a valid Driver's License State I.D. S.S. Card Rent Amount _____

Address of Rental Property _____
 Unit # _____ City _____ State _____ Zip _____

An Incomplete Application causes a delay in processing and may result in denial of tenancy. Complete separate application if co-applicant is other than spouse.

Applicant's Name _____ SS# _____
 (Full Legal) First Middle Last

DOB: _____ Dr. Lic. # / St _____ Phone # _____

Spouse's Name _____ SS# _____
 (Full Legal) First Middle

DOB: _____ Dr. Lic. # / St _____ Phone # _____

Occupants Name, Age & Relationship: _____ Applying w/roommate? Yes No

CURRENT ADDRESS----- PRIOR ADDRESS-----

Street _____ Street _____

City _____ City _____

State/Zip code _____ Rent Own _____ State/Zip code _____ Rent Own _____

Pymts pd to: _____ Amt. \$ _____ Pymts pd to: _____ Amt. \$ _____

How long (Mo./Day/Yr.) _____ From _____ To _____ How long (Mo./Day/Yr.) _____ From _____ To _____

Apt. Community _____ Unit# _____ Apt. Community _____ Unit# _____

Landlord/Mgr. _____ Hm# _____ Wk# _____ Landlord/Mgr. _____ Hm# _____ Wk# _____

PRESENT OCCUPATION----- PRIOR OCCUPATION----- SPOUSE'S OCCUPATION-----

Employer _____ Employer _____ Employer _____

Street _____ Street _____ Street _____

City _____ State _____ City _____ State _____ City _____ State _____

Type of Bus _____ Type of Bus _____ Type of Bus _____

Title _____ Title _____ Title _____

Mgr./CO _____ Ph.# _____ Mngr/CO _____ Ph.# _____ Mngr/Co _____ Ph.# _____

Hire Date _____ Dates _____ Mo. Salary\$ _____ Hire Date _____ Mo. Salary\$ _____

Have you or any other person named on this application ever been convicted of any crime or felony? Yes No If yes, when? _____

Date of Conviction: _____ **In what state & county?** _____ **Are you still responsible to the court?** Yes No

Have you or any other person named on this application: Been evicted? Yes No **Refused to pay rent?** Yes No **Filed Bankruptcy?** Yes No

If evicted, where: _____

Are you currently a registered sex offender? Yes No **If yes, what state & county?** _____

In compliance with state and federal laws, this is to inform you that a consumer investigation involving statements made on this application is being initiated. This investigation may involve obtaining information regarding your character, general reputation, credit, mode of living and criminal background. You have the right to dispute the information reported. If this application is denied because of credit history, you may obtain a copy of your credit report from the credit reporting agency. Tenant Screening Services or landlord has my permission to release information found in screening for any lawful purpose associated with tenancy of the premises. I authorize Tenant Screening Services to obtain credit reports, character information, verification of rental history, employment history, bank information, public records and personal reference as necessary to verify all information set forth in this application.

I certify that to the best of my knowledge all statements in this application are true and correct. I understand that false, misleading or incomplete information can be grounds for denial of tenancy or for eviction. _____ (Initials).

I understand that Tenant Screening Services is not responsible for rental decisions.

Signed _____ Signed _____ Date _____

Agent _____ Tenant _____ Tenant _____

_____ Title _____ Date _____