



**APPLICATION FOR RENTAL**

Date: \_\_\_\_\_

Applicant's Last Name	First Name	Middle Name	Birthdate	Driver's Lic # & State	Soc Sec No.
Married <input type="checkbox"/> Unmarried <input type="checkbox"/>	Spouse's Full Name		Birthdate	Driver's Lic # & State	Soc Sec No.
Separated					
Cell Phone Number	2nd Cell #	Email Address		2nd Email Address	
Expected Move-In Date	Total number of People to Occupy Apt. : _____	Do you have any pets? YES <input type="checkbox"/> NO <input type="checkbox"/>		List Pet's Names and Breed	

**PART I RESIDENT HISTORY**

Please list residence history for previous three years.

Present Address	City	State	Zip	How Long	Area Code Phone #:	Own <input type="checkbox"/> Rent <input type="checkbox"/>
Name and Address of Present Landlord or Mortgage Co.					Area Code Phone #:	Monthly Payment
Previous Address	City	State	Zip	How Long	Area Code Phone #:	Own <input type="checkbox"/> Rent <input type="checkbox"/>
Name and Address of Landlord or Mortgage Co.					Area Code Phone #:	Monthly Payment
Previous Address	City	State	Zip	How Long	Area Code Phone #:	Own <input type="checkbox"/> Rent <input type="checkbox"/>
Name and Address of Landlord or Mortgage Co.					Area Code Phone #:	Monthly Payment

**PART II OTHER OCCUPANTS AND/OR PETS**

Persons and/or pets not listed below are NOT authorized to occupy your apartment. Unauthorized Occupants and/or pets is a lease violation.

State All Other Occupants Names	Dob	Relationship	Social Security or Tax ID No.
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____

**PART III EMPLOYMENT HISTORY**

Applicant Employed by:	Supervisor's Name:		How Long?
Address	City	State	Zip
Phone:	Position Held:	Monthly Salary	
Previous Employment	Supervisor's Name:		How Long?
Address	City	State	Zip
Phone:	Position Held:	Monthly Salary	
Spouse Employer	Supervisor's Name:		How Long?
Address	City	State	Zip
Phone:	Position Held:	Monthly Salary	
Spouse Previous Employer	Supervisor's Name:		How Long?
Address	City	State	Zip
Phone:	Position Held:	Monthly Salary	

<b>Additional Income</b>	Amount: \$ _____ per _____ Source: _____
	Amount: \$ _____ per _____ Source: _____

<b>Emergency Contact:</b>	Address	Telephone
Name: _____ Relationship: _____	_____	_____

Applicant hereby represents that the information set forth on this application is true and correct. I understand that Management will rely on the information provided in making a decision to accept, conditionally accept, or deny my application. Applicant authorizes Management and its agents to verify the information provided herein by obtaining my credit file, rental history and employment information. Applicant releases Management and any third parties that may provide information to verify this application from all liability, claims, and lawsuits with regard to the information obtained, regardless of the source, or whether the information provided is negative. Applicant has submitted the sum of \$ \_\_\_\_\_ which is a NON-refundable payment for a credit check and processing charge, receipt of which is acknowledged by Management. Applicant understands and agrees that the good faith deposit in the amount of \$ \_\_\_\_\_, other deposits in the amount of \$ \_\_\_\_\_ and non-refundable rental fees in the amount of \$ \_\_\_\_\_. Such sum is to be paid and will be returned if application is denied. If application is approved, the applicant hereby agrees to sign a formal binding lease agreement and take possession of an apartment on or before the move-in date listed above. Applicant acknowledges that the Good Faith deposit is not a security deposit; however, upon signing a rental agreement, the Good Faith deposit will be applied toward any security deposit or Non-refundable fees as specified in the rental agreement. In the event that the applicant defaults under the terms of this application, Applicant acknowledges that Management shall keep the Good Faith Deposit and other deposits and non-refundable fees paid as liquidated damages which are compensation for holding the apartment off the market. Applicant agrees that the amount in lost rent and fees for holding the apartment off the market is unknown and that this provision is intended as a good faith estimate of Management's damages in the event of the Applicant's default. The Good Faith Deposit does not constitute a security deposit.

*I have read and fully understand the above information. I request and fully authorize Management to process this application for Rental.*

Applicant Signature \_\_\_\_\_ Applicant Signature \_\_\_\_\_

# APPLICATION VERIFICATION

*This side of Application form is for Office Use only*

All information will be checked thoroughly by completing the information below. The person obtaining the information will initial the "BY" column.  
 After the verification is complete, it will be given to the Manager for final Approval and completion of Approval Form.

## PART I RENTAL HISTORY

Landlord/ Property Name:					Dates of Residency			
Payment History	Rent Amount	Length of Stay	Noise Complaints	Notice Given	Deposit Refunded	Condition	Info From	BY
Landlord/ Property Name:					Dates of Residency			
Payment History	Rent Amount	Length of Stay	Noise Complaints	Notice Given	Deposit Refunded	Condition	Info From	BY
Landlord/ Property Name:					Dates of Residency			
Payment History	Rent Amount	Length of Stay	Noise Complaints	Notice Given	Deposit Refunded	Condition	Info From	BY

## PART II EMPLOYMENT HISTORY

Present Employer:				Dates of Employment			
Supervisor Name	Salary	Address:		Title	Full Time	Permanent	BY
Previous Employer:				Dates of Employment			
Supervisor Name	Salary	Address:		Title	Full Time	Permanent	BY
SPOUSE Present Employer:				Dates of Employment			
Supervisor Name	Salary	Address:		Title	Full Time	Permanent	BY
SPOUSE Previous Employer:				Dates of Employment			
Supervisor Name	Salary	Address:		Title	Full Time	Permanent	BY
Additional Income:		Type:	Amount:				BY
Method of Verification:							

## PART III ADDITIONAL INCOME

#	SOURCE	Amount	Name of Contact	BY
1)				
2)				
3)				
4)				

## PART IV CREDIT RATIO


Non-Refundable Fee: \_\_\_\_\_ Apartment Type: \_\_\_\_\_  
 Other Security Deposit: \_\_\_\_\_ Apartment #: \_\_\_\_\_  
 Pet Fee / Deposit: \_\_\_\_\_ Term of Lease: \_\_\_\_\_  
 Leasing Agent: \_\_\_\_\_ Concession: \_\_\_\_\_  
 Traffic Source: \_\_\_\_\_ Rental Rate: \_\_\_\_\_

Applicant Income: _____	Manager Application Approval Complete: YES <input type="checkbox"/>
Other Verified Income: _____	Application: APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/>
Total: _____	Manager Signature: _____
Comments: _____	
Application Processed BY: (Print Name) _____	
Date Applicant Notified: _____ (Must contact Applicant within 3 days of completed application)	