

Sherman Tower
901 Sherman Street, Denver CO 80203
Rental Application Phone:303.837.0611 Fax:303.832.8328

Move in Date _____ Co-Signer Y N Lease Term _____ Apt# _____ Rent\$ _____
Name _____ Social Security # _____ Birth Date _____
Work Phone # (____) _____ Home Phone # (____) _____ Cell Phone # (____) _____
Name(Co Occupant) _____ Soc. Sec # _____ Birth Date _____
E-mail Address _____

Rental History

Present Address _____ Apt# _____ City _____ State _____ Zip _____
Date From ___/___/___ Date To ___/___/___ Monthly Rent _____ Roomate Y N
Landlord Name _____ Phone#(____) _____ City _____ State/Zip _____
Landlord Address _____
Previous Address _____ Apt# _____ City _____ State _____ Zip _____
Date From ___/___/___ Date To ___/___/___ Monthly Rent _____ Roomate Y N
Landlord Name _____ Phone#(____) _____ City _____ State/Zip _____
Landlord Address _____

Income or Employment History

Present Employer Company Name _____
Address _____ City _____ State/Zip _____
Contact Name _____ Phone#(____) _____ Position _____
Hire Date ___/___/___ Gross Income _____
Previous Employer Company Name _____
Address _____ City _____ State/Zip _____
Contact Name _____ Phone#(____) _____ Position _____
Hire Date ___/___/___ End Date ___/___/___ Gross Income _____

All applicants and cosigner/guarantor's must complete and sign this form.

APPLICANT (Cosigner/Guarantor) CONSENT

(This language may be incorporated in the property's standard leasing application)

I hereby consent to allow Sherman Tower Apartments, 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, Sherman Tower Apartments, 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 application review methods.

_____ Applicant (or Cosigner/Guarantor) name

_____ Signature

_____ Date

If faxed or mailing, a legible copy of your photo ID must accompany your application.