

Smoking is not allowed in this rental unit, basement, deck or patio, building hallways or foyer.

Notice: Co-Applicant must complete a separate rental application form.

FOR OFFICE USE ONLY	
Date Available/Lease term Begins _____	Application Fee Paid: <input type="checkbox"/> Cash <input type="checkbox"/> Check # _____
Apartment Address _____	
Lease Term _____	Apt Rent \$ _____ Security Deposit \$ _____

PERSONAL INFORMATION		
APPLICANT'S FULL NAME _____		
Date of Birth _____		
Social Security No. _____	Driver's License No./State _____	copy <input type="checkbox"/>
SPOUSE'S FULL NAME _____		
Date of Birth _____		
Social Security No. _____	Driver's License No./State _____	copy <input type="checkbox"/>
Full Names of All Other Residents:	Relationship To You	Date of Birth

RESIDENCE HISTORY	
PRESENT ADDRESS _____	
Street _____	City / State / Zip _____
Your Phone # _____	Dates: From _____ To _____
Present Landlord or Mortgage Co. _____	Landlord's Phone (_____) _____
Monthly Payment \$ _____	Reason For Moving _____
PREVIOUS ADDRESS _____	
Street _____	City / State / Zip _____
Dates of Residency At This Address: From _____ To _____	
Present Landlord or Mortgage Co. _____	Telephone (_____) _____
Monthly Payment \$ _____	Reason For Moving _____

EMPLOYMENT INFORMATION	
PRESENT STATUS: <input type="checkbox"/> Employed Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Not Employed <input type="checkbox"/> Retired <input type="checkbox"/> Student	
PRESENT EMPLOYER: (or most recent) _____ Supervisor _____	
Employer's Address _____	
Telephone (_____) _____	Dates Employed: From _____ To _____
Position Held _____	Gross Monthly Income \$ _____
PREVIOUS EMPLOYER: _____	
Employer's Address _____	
Telephone (_____) _____	Dates Employed: From _____ To _____
IF STUDENT, LIST SCHOOL: _____ School Telephone (_____) _____	

PRESENT STATUS: Employed Full-Time Part-Time Not Employed Retired Student

SPOUSE'S PRESENT EMPLOYER: _____ Supervisor _____

Employer's Address _____

Telephone (____) _____ Dates Employed: From _____ To _____

Position Held _____ Gross Monthly Income \$ _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation.

**You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.*

Amount \$ _____ Per _____ Source _____ Telephone (____) _____

BANKING AND CREDIT REFERENCES			
Your Bank	City-State/Branch	Acct. Number & Type	Telephone

OTHER INFORMATION

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) _____

Make/Model _____ Year _____ Color _____ Tag No./State _____

Make/Model _____ Year _____ Color _____ Tag No./State _____

Other Car, Motorcycle, etc. _____

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes No

Been evicted or asked to move out? Yes No Broken a Rental Agreement or Lease? Yes No

Been sued for damage to rental property? Yes No Declared Bankruptcy? Yes No

In Case of Personal Emergency, Notify: _____ Relationship _____

Address _____ Home Phone (____) ____-____ Work Phone (____) ____-____

AUTHORIZATION

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application I warrant that all statements above set forth are true.

*I hereby deposit \$20 as a non-refundable application fee. If the application is approved and accepted I agree to execute a lease before possession is given and to pay the security deposit within ten (10) business banking days after being notified of acceptance. If the application is approved and accepted and I refuse to enter into a lease agreement for the period of time called for in the application, the sum received shall be retained by the owner as liquidated damages. This agreement shall in no way bind the owner to accept this application for tenancy (the acceptance or rejection of the applicant as a tenant shall remain with the sole discretion of the owner). I also agree to maintain sufficient **property damage and liability insurance** to fulfill my responsibility under the lease and to have the utilities turned on in the apartment under my name prior to taking occupancy after the lease has been signed.*

I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit-reporting agency and periodically re-run this check at any time in the future to verify the truth and accuracy of any information given on this application.

Absolutely no pets allowed on premise. No smoking allowed in any rental building or basement. Units will not be available for occupancy until 3:00 pm of the day the lease term begins.

APPLICANT'S SIGNATURE _____ DATE _____

SPOUSE'S SIGNATURE _____ DATE _____