

RENTAL APPLICATION

Thank you for your interest in renting with _____ ("Landlord").
Please complete the requested information on this form.

Non-Refundable Application Fee: \$ _____ Paid ____ / ____ / ____

Applicant Name _____
Social Security No. ____ - ____ - ____ Date of Birth ____ / ____ / ____
Telephone: _____ Email: _____

Co-Applicant Name _____
Social Security No. ____ - ____ - ____ Date of Birth ____ / ____ / ____
Telephone: _____ Email: _____

Occupant Name _____
Social Security No. ____ - ____ - ____ Date of Birth ____ / ____ / ____
Relationship _____

Occupant Name _____
Social Security No. ____ - ____ - ____ Date of Birth ____ / ____ / ____
Relationship _____

Do you have a pet? Yes No
Type: _____ Breed: _____ Age: _____ Weight: _____ Name: _____

NOT APPROVED UNLESS SPECIFIED AND APPROVED BY LANDLORD

PREVIOUS RESIDENCES

Present Address: _____
For How Long? ____ Months ____ Days
Present Landlord or Mortgage Holder Name: _____
Telephone ____ - ____ - ____
Amount of Rent (Mortgage Payment): \$ _____
Reason for Moving: _____

Previous Address: _____
For How Long? ____ Months ____ Days
Landlord or Mortgage Holder Name: _____
Telephone ____ - ____ - ____
Amount of Rent (Mortgage Payment): \$ _____
Reason for Moving: _____

Previous Address: _____

For How Long? ____ Months ____ Days

Present Landlord or Mortgage Holder Name: _____

Telephone ____ - ____ - ____

Amount of Rent (Mortgage Payment): \$ _____

Reason for Moving: _____

Have you ever had an eviction lawsuit filed against you? Yes No

EMPLOYMENT HISTORY

Applicant's Employer: _____

For How Long? ____ Years ____ Months ____ Days

Current Position Held: _____

Gross Monthly Salary: \$ _____

Supervisor's Name: _____

Address: _____

Telephone ____ - ____ - ____

Other Sources of Income: _____ Gross Monthly Income: \$ _____

If Responsible for Paying Child Support, Alimony or Maintenance Indicate Amount: \$ _____

Month Year

Do you have a Section 8 Voucher? Yes No City: _____ State: _____

Who is Your Case Worker? _____ Telephone Number: _____

How Much is Your Monthly Assistance? \$ _____

Co-Applicant's Employer: _____

For How Long? ____ Years ____ Months ____ Days

Current Position Held: _____

Gross Monthly Salary: \$ _____

Supervisor's Name: _____

Address: _____

Telephone ____ - ____ - ____

Other Sources of Income: _____ Gross Monthly Income: \$ _____

If Responsible for Paying Child Support, Alimony or Maintenance Indicate amount: \$ _____

Month Year

Do you have a Section 8 Voucher? Yes No City: _____ State: _____

Who is Your Case Worker? _____ Telephone Number: _____

How Much is Your Monthly Assistance? \$ _____

BANK AND CREDIT REFERENCES

Bank Name: _____

Account type: Checking Savings Other _____

Address: _____

Account No.: _____

Credit Reference: _____

Address: _____

Account No.: _____

Payment: \$ _____ Month \$ _____ Year

Credit Reference: _____

Address: _____

Account No.: _____

Payment: \$ _____ Month \$ _____ Year

Personal Reference: _____

Address: _____

Telephone: _____ - _____ - _____

Relationship: _____

VEHICLE AND LICENSE INFORMATION

Driver's License No.: _____ State: _____

Vehicle Title in Name of: _____

Vehicle Model	Year	Color	Plate No.	State
_____	_____	_____	_____	_____

EMERGENCY CONTACT

In Case of an Emergency, Please Notify: _____

Phone No: _____ - _____ - _____

Address: _____

Relationship: _____

Have you or your co-applicant ever plead guilty, been convicted of, or been placed on probation for any crime? Yes No

IF YES, please state:

The Date of Said Plea or Conviction: ____ / ____ / ____

The Nature of the Offense: _____

The Court and State in Which Such Plea/Conviction was Entered: _____

Are Any Criminal Charges Presently Pending Against You or Your Co-Applicant? Yes No

IF YES, please state:

The Nature of the Charge: _____

The Court and State in Which Such Charge is Pending: _____

GENERAL INFORMATION:

Reason for Moving? More Convenient to Work School Recreation

TENANT INFORMATION SHEET

(complete this form for each occupant – even if a minor)

PREMISES: _____ APT: _____

TENANT'S NAME: _____

SOCIAL SECURITY NO: _____ - _____ - _____

BIRTH DATE: ____ / ____ / ____ AGE: _____

EMAIL: _____

HOME PHONE NO: _____ - _____ - _____

CELL PHONE NO: _____ - _____ - _____

CURRENT EMPLOYER: _____

EMERGENCY CONTACT: _____

Phone No: _____ - _____ - _____

Relationship: _____

OF ADULTS _____ # OF CHILDREN _____ # OF PETS _____

CURRENT RENT: \$ _____ SECURITY DEPOSIT: \$ _____

PET DEPOSIT: \$ _____ PET RENT: \$ _____

NEW LEASE RENEWAL TRANSFER

TERM: _____ - _____ - _____ TO _____ - _____ - _____

SPECIALS / CONCESSIONS: _____ VALUE \$ _____

RENTAL OR HOUSING ASSISTANCE: Yes No VALUE \$ _____

VEHICLE MODEL	YEAR	COLOR	PLATE NO.	STATE
_____	_____	_____	_____	_____

NOTES: _____

Office Use Only	
Date Received:	Received By:
Documents Prepared:	
Signed:	