

Telephone Number Where Applicant Can Be Reached

RENTAL APPLICATION

Name of Community

Apt No.	Rental Rate \$
---------	----------------

Last Name of Applicant	First Name	Middle Name
------------------------	------------	-------------

Birth Date	Driver's License No. or other Official ID	State	Social Security #
------------	---	-------	-------------------

Number of Persons Apt to be occupied by	Occupants Names
---	-----------------

Current Address	City	State	Zip Code	Lived Here How Long?
-----------------	------	-------	----------	----------------------

Own	Rent	Rental Rate Per Month \$	Name of Owner/Landlord	Phone Number
-----	------	--------------------------	------------------------	--------------

Previous Address	City	State	Zip Code	Lived Here How Long?
------------------	------	-------	----------	----------------------

Own	Rent	Rental Rate Per Month \$	Name of Owner/Landlord	Phone Number
-----	------	--------------------------	------------------------	--------------

Employer	Supervisor's Name	How Long Employed?
----------	-------------------	--------------------

Address	Phone	Position Held or Rank	Salary \$ per
---------	-------	-----------------------	---------------

Previous Employer (if above is 2 years or less)	Supervisor's Name	How Long Employed?
---	-------------------	--------------------

Address	Phone	Position Held or Rank	Salary \$ per
---------	-------	-----------------------	---------------

Additional Income Amount	Source of Additional Income
--------------------------	-----------------------------

Applicant's Closest Relative	Address	City	State	Relationship	Phone
------------------------------	---------	------	-------	--------------	-------

In Case of Emergency Call	Address	City	State	Relationship	Phone
---------------------------	---------	------	-------	--------------	-------

Bank Accounts

Checking - Name of Bank	Branch	City and State	Account Number
-------------------------	--------	----------------	----------------

Savings - Name of Bank	Branch	City and State	Account Number
------------------------	--------	----------------	----------------

Vehicles: How many Vehicles Will You Keep at This Address:

Car 1	Make	Model	Year	Color	License No
-------	------	-------	------	-------	------------

Car 2	Make	Model	Year	Color	License No
-------	------	-------	------	-------	------------

MOTORCYCLE	Make	Model	Year	Color	License No
------------	------	-------	------	-------	------------

PETS	Number	Type
------	--------	------

Name and Address of Referring Party	Phone Number
-------------------------------------	--------------

Have you ever been evicted from any tenancy? Yes No
 Have you ever been convicted of a felony? Yes No

If the answer is yes to either of the above questions, provide the details, including the date, place, and nature of the eviction or conviction.

APPLICATION CHECK = OFFICE USE ONLY	CREDIT CODE:
--	---------------------

LANDLORD	How Long: Rent:	Under 6 Mo. -----	6 Mo. to 12 Mo. -----	6 Mo. to 12 Mo. -----
	Delinquent:	-----	-----	-----
	Noise:	-----	-----	-----
	Re rent?	Yes No	Yes No	Yes No

EMPLOYER	How Long: Salary Range	Under 6 Mo.	6 Mo. to 12 Mo.	6 Mo. to 12 Mo.
-----------------	---------------------------	-------------	-----------------	-----------------

Applicant hereby authorizes management to investigate applicant's credit history, any reports from credit reporting agencies, financial institutions, present or past employers, landlords, and/or tenant reporting agencies.

A driver's license or other official identification must be produced for identity / financial verification purposes.

_____ Applicant agrees that the holding/reservation deposit will become the property of management 24 hours after approval of this Application by management, whether or not applicant signs a rental agreement.

Applicant agrees that the application fee is nonrefundable.

The undersigned applicant hereby declares that the representations of fact contained in the foregoing application are considered part of my lease and are true and correct. I agree that if any information contained is false, the lease made on the strength of this application may, at the option of the landlord, be terminated at any time.

Signature of Applicant: _____ Date: _____

Signature of Rental Agent: _____ Date: _____