

APPLICATION FOR RENTAL

Applicants Last Name	First	Middle Name	Birthdate	Driver's License No. & State	Soc. Sec. No.
<input type="checkbox"/> Unmarried <input type="checkbox"/> Separated <input type="checkbox"/> Married	Spouse's Name		Birthdate	Driver's License No. & State	Soc. Sec. No.
Expected Move-In Date	Apt. to be Occupied By		Children's Names & Ages		
Do you have Pet(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	How Many?		Type & Size (Keeping of Pets requires a pet deposit and Owner's Consent.)		

PART I RESIDENCE HISTORY

Present Address Zip	City	State	How Long?	Area Code Phone	<input type="checkbox"/> Own <input type="checkbox"/> Rent
Name & Address of Present Landlord or Mortgage Co.				Area Code Phone	Monthly Pmt.
Previous Residence Address	Previous Landlord or Apt. Community		Area Code Phone	How Long?	

PART II EMPLOYMENT HISTORY - PAST YEAR

Applicant Employed By	Supervisor's Name		How Long?
Address	City	State	Zip
Phone		Position Held/Occupation	
Salary \$ _____ Per _____			
Previous Employed By			
Supervisor's Name		How Long?	
Address	City	State	Zip
Phone		Position Held/Occupation	
Salary \$ _____ Per _____			
Spouse Employed By			
Supervisor's Name		How Long?	
Address	City	State	Zip
Phone		Position Held/Occupation	
Salary \$ _____ Per _____			
Spouse - Previous Employment			
Supervisor's Name		How Long?	
Address	City	State	Zip
Phone		Position Held/Occupation	
Salary \$ _____ Per _____			

ADDITIONAL INCOME
 Additional Income such as child support, alimony or separate maintenance need not be disclosed unless such Additional Income is to be included for qualification hereunder.
 Source: _____
 Amount of \$ _____ Per _____

PART III CREDIT AND LOAN REFERENCES

No. of Vehicles on Property	Do you have any recreational vehicles, vans, boats, motorcycles? If so, specify.		
Auto No. 1 - Type	License No.		State
Financed Thru	Account No.		Monthly Pmt.
Auto No. 2 - Type	License No.		State
Financed Thru	Account No.		Monthly Pmt.

Loans & Charge Accounts (including Dept. Stores, Credit Cards, etc.)

Owed To	Account No.	Address	Zip	Total Debt	Payments
					\$ _____ Per _____
					\$ _____ Per _____
					\$ _____ Per _____
					\$ _____ Per _____

PART IV BANK REFERENCES

Name of Bank or Savings & Loan	Account No.	Address	City	State	Zip

PART V

Family Physician	Address	City	State	Zip	Area Code Phone
In Case of Emergency, Call	Relationship	Address	City	State	Zip Area Code Phone

Applicant hereby authorizes verification of any and all information set forth on this Application, including release of information by any bank or savings and loan, employer (present and former) and any Lender. All such information hereon, and released as authorized above, will be kept confidential. APPLICANT REPRESENTS THAT THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND COMPLETE. Material misrepresentation on this Application will constitute a default under the lease or Rental Agreement between the parties.

CREDIT CHECK CHARGE - Applicant has submitted the sum of \$ _____ which is a nonrefundable payment for a credit card check and processing charge, receipt of which is acknowledged by Management. Such sum is not a rental payment or deposit amount. In the event this application is approved or disapproved, the sum will be retained by management to cover the cost of processing application as furnished by applicant. This application must be signed before it can be processed by management.

GOOD FAITH DEPOSITS - I hereby deposit \$ _____ with Management as a good faith deposit in connection with this rental application. If my application is accepted, I understand this deposit can be applied toward payment of my security deposit of \$ _____ when I take possession of the apartment. If for any reason Management decides to decline my application, the Management will refund this good faith deposit to me in full. I understand I may cancel this application by written notice within _____ hours and receive a full refund of this good faith deposit within 30 days of the cancellation. If I cancel after _____ hours or refuse to occupy the premises on the agreed upon date, I understand this good faith deposit will be held until Management can determine if it has incurred any expense or rent loss due to my cancellation. These costs will be deducted from this good faith deposit and the balance will be refunded to me.

Applicants Signature _____ Date _____ Applicants Signature _____ Date _____
 RELEASE OF GOOD FAITH DEPOSIT - I authorize Management to release my good faith deposit of \$ _____ on Apartment _____ and apply it towards a security deposit of \$ _____
 Applicants Signature _____ Date _____ Applicants Signature _____ Date _____