

RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated.

PERSONAL IN	FORMA'	ΓΙΟΝ										
FIRST NAME		MIDDLE			LAST			S.S.#				
DATE OF BIRTH	/	MARITAL STATU	S SINGLE	MARRIED Since	MARRIED Since DIVORCED Since			DRIVERS LICENSE # STATE				
PHONE – GELL HOME PHONE				FXT				EMAIL				
PRESENT HOME ADDRESS					CITY/STATE/ZI	Р						
LENGTH OF TIME			PRESENT LA	ANDLORD				LANDLORD PHONE				
REASON FOR LEAVING					AMOUNT OF RENT			Is your present rent up to date?				
PREVIOUS HOME ADDRESS				CITY/STATE/ZIP								
LENGTH OF TIME			PREVIOUS L	IOUS LANDLORD				NE				
REASON FOR LEAVING					AMOUNT OF RENT			Was your rent up to date?				
NEXT PREVIOUS HOME ADDRESS	3				CITY/STATE/ZI	Р						
LENGTH OF TIME			NEXT PREVI	IOUS LANDLORD				LANDLORD PHONE				
REASON FOR LEAVING			•		AMOUNT OF RENT			Was your rent up to date?				
PROPOSED OG	CCLIPAN	IT(S)										
NAME	PROPOSED OCCUPANT(S) NAME RELATIONSHIP					OCCUPATION			AGE			
NAME RELATION			TIONSHIP			OCCUPATION			AGE			
NAME RELA			ONSHIP			OCCUPATION			AGE			
NAME RELATI			ATIONSHIP			OCCUPATION			AGE	AGE		
NAME RELATION			DNSHIP			OCCUPATION			AGE	AGE		
PROPOSED PE	T(S)											
NAME TYPE/BREED					☐ INDOOR	ОИТРООІ	₹	AGE				
NAME TYI		TYPE/B	TYPE/BREED			☐ INDOOR ☐ OUTDOOR			AGE			
NAME TY		TYPE/B	TYPE/BREED			INDOOR	_ оитрооі		AGE			
VEHICI E(S) IN	IEODM	TION										
YEHTCLE(S) IN	VEHICLE(S) INFORMATION EAR MAKE MODEL				COLOR PLAT				STATE			
YEAR	IR MAKE		MODEL		COLOR		PLATE #		STATE			
EMPLOYMENT												
CURRENT EMPLOYER			OCCUPATION				HOURS/WEEK					
SUPERVISOR ADDRESS				PHONE EXT: CITY/STATE/ZIP				YEARS EMPLOYED				
								LUQUIDE AMEEN				
CURRENT EMPLOYER SUPERVISOR				OCCUPATION EVT.			HOURS/WEEK					
ADDRESS				PHONE _ EXT: CITY/STATE/ZIP			YEARS EMPLOYED					
NODICESS				CITT/SIMIE/ZIP								
INCOME												
CLIDDENT	ekly 🔲 Biweek	LY 🔲 MONTHLY	YEARLY	SOURCE				PROO	F OF INCOME	YES 🔲 NO		
CURRENT \$ WEE	ekly 🔲 biweek			SOURCE SOURCE					E OE INCOME	YES NO		



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CREDIT CARD / FINANCIAL IN	IFORMATION						
CAR LOAN LIEN HOLDER	BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #			
CREDIT CARD COMPANY	BALANCE MONTHLY OWED PAYMENT			CREDITOR'S			
CREDIT CARD COMPANY	BALANCE MONTHLY OWED PAYMENT			CREDITOR'S			
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	MONTHLY		CREDITOR'S		
CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S			
BANK ACCOUNT NAME OF BANK	BALANCE MONTHLY PAYMENT			ACCOUNT NUMBER			
EMERGENCY / PERSONAL REF	FRENCE INFORMAT	TION					
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE	_	_	□ НОМЕ	□ LWORK
RELATION	ADDRESS	CELL I HOME	CITY/STATE/ZII)		I HOME	WORK
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE	_		□ НОМЕ	□ I WORK
RELATION	ADDRESS	CELL I HOME	CITY/STATE/ZII)		I HOME	WORK
PERSONAL REFERENCE	PHONE	☐ CELL ☐ HOME	PHONE	_	_	Пноме	□ I WORK
RELATION	ADDRESS	CELL HOME	CITY/STATE/ZII)		□ НОМЕ	WORK
PERSONAL REFERENCE	PHONE	CELL HOME	PHONE	_	_	☐ НОМЕ	□ WORK
RELATION	ADDRESS	T CLLL THOME	CITY/STATE/ZII)		TIONE	WORK
APPLICANT QUESTIONNAIRE	/ AUTHORIZATION						
Has applicant ever been sued for bills?	Has applicant ever been locked out of	their apartment by th	ne sheriff?	YES	☐ NO		
Has applicant ever been bankrupt?	Has applicant ever been brought to court by another landlord?				☐ NO		
Has applicant ever been guilty of a felony? YES NO	Has applicant ever moved owing rent or damaged an apartment?				☐ NO		
Has applicant ever broken a Lease?	Is the total move-in amount available	now (rent and depos	it)?	YES	☐ NO		
Applicant authorizes the landlord to contact past and present lar	ndlords, employers, creditors, credit burea	aus, neighbors and an	y other sources	deemed r	necessary to i	nvestigate a	pplicant.
All information is true, accurate and complete to the best of ap	·	. ,			•		
ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMAT	ION ABOUT THE UNDERSIGNED UPON	Presentation of th	IIS FORM OR A	PHOTOCO	OPY OF THIS	FORM AT AN	NY TIME.
x					_		
APPLICANT SIGNATURE							
If you have any questions about the	e interpretation or legality of this form, p	lease consult an attor	ney or other q	ualified pe	rson.		
NOTES:							

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