Application for Occupancy

MUST SUBMIT WITH ID AND PROOF OF INCOME

Applicant Name: _____ DOB: _____ SSN: _____

Marital Status: _____ Driver License #: _____ State: _____ Phone: _____ Email: _____

Spouse's Name: _____ DOB: _____ SSN: _____ Phone: _____

Email: _____

Other Occupants:

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Name: _____ Age: _____ Relationship: _____

Present Address: _____ City: _____ State: _____ Zip: _____

Date From - To: _____ Present Landlord: _____ Phone #: _____

Monthly Rent: _____ Reason for Leaving: _____

Previous Address: _____ City: _____ State: _____ Zip: _____

Apt. or Landlord Name: _____ Phone #: _____ How Long: _____

Monthly Rent: _____ Reason for Leaving: _____

Present Employer: _____ Position: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Supervisor: _____ Phone #: _____ Employed Since: _____

Previous Employer: _____ Position: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Supervisor: _____ Phone #: _____ Employed Since: _____

Spouses Employer: _____ Position: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Supervisor: _____ Phone #: _____ Employed Since: _____

Vehicle Year & Make: _____ Color: _____ License Plate # & State: _____

Vehicle Year & Make: _____ Color: _____ License Plate # & State: _____

References:

Name; _____ Relationship _____ Telephone Number _____

Name: _____ Relationship _____ Telephone Number _____

Name: _____ Relationship _____ Telephone Number _____

Do you own any pets? _____ If so, how many? _____ Kind: _____

Weight: _____ Color: _____

Emergency Contact Name: _____ Phone #: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Optional: Are you a United States Veteran? ☐ Yes ☐ No

Annual Salary:

Annual Salary (Spouse):

AUTHORIZATION OF RELEASE OF INFORMATION Applicant(s) represents that all of the above information and statements on the application for rental are true and complete, and hereby authorizes an investigative consumer report including, but not limited to, residential history (rental or mortgage), employment history, criminal history records, court records, and credit records. This application must be signed before it can be processed by management. **Applicant acknowledges that false or omitted information herein may constitute grounds for rejection of this application, termination of right of occupancy, and/or forfeiture of fees or deposits and may constitute a criminal offense under the laws of this State.**

The undersigned warrants and represents the information on this application to be true and correct. All persons or firms named may freely give any requested information concerning me and I hereby waive all right of action for any consequences resulting from such information.

_____ _____ _____ _____

Applicant's Signature Date Spouse's Signature Date