RENTAL APPLICATION

FIRST SERVICE REALTY ERA

Address: _____ City/State/ZIP: _____

Every occupant 18 and over MUST fill out a separate application (even if married).

Please fill out this form **COMPLETELY** and sign where indicated. **PLEASE PRINT OR TYPE ONLY.**

PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	DATE OF BIRTH

MARITAL STATUS	DRIVERS' LICENSE#	STATE	HOME PHONE

CELL PHONE	EMAIL

PRESENT HOME ADDRESS	CITY/STATE/ZIP

LENGTH OF TIME	PRESENT LANDLORD	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 LANDLORD	LANDLORD PHONE

REASON FOR LEAVING	AMOUNT OF RENT	WAS YOUR RENT UP TO DATE?

PROPOSED OCCUPANT(S) UNDER 18

NAME	RELATIONSHIP	AGE
NAME	RELATIONSHIP	AGE

PROPOSED PET(S)

NAME	TYPE/BREED	WEIGHT	SERVICE ANIMAL (Y/N)	AGE
NAME	TYPE/BREED	WEIGHT	SERVICE ANIMAL (Y/N)	AGE
NAME	TYPE/BREED	WEIGHT	SERVICE ANIMAL (Y/N)	AGE

VEHICLES(S) INFORMATION

YEAR	MAKE	MODEL	COLOR	PLATE #	STATE
YEAR	MAKE	MODEL	COLOR	PLATE #	STATE

EMPLOYMENT

CURRENT EMPLOYER	OCCUPATION	MONTHLY INCOME
SUPERVISOR	PHONE EXT	YEARS EMPLOYED
ADDRESS	CITY/STATE/ZIP	PROOF OF INCOME (Y/N)
PREVIOUS EMPLOYER	OCCUPATION	MONTHLY INCOME
SUPERVISOR	PHONE EXT	YEARS EMPLOYED
ADDRESS	CITY/STATE/ZIP	PROOF OF INCOME (Y/N)

OTHER INCOME

MONTHLY INCOME	SOURCE	PROOF OF INCOME (Y/N)
MONTHLY INCOME	SOURCE	PROOF OF INCOME (Y/N)
MONTHLY INCOME	SOURCE	PROOF OF INCOME (Y/N)

FIRST SERVICE REALTY ERA REAL ESTATE POWERED

RENTAL APPLICATION

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EMERGENCY INFORMATION

EMERGENCY CONTACT	PHONE	PHONE
RELATION	ADDRESS	CITY/STATE/ZIP
EMERGENCY CONTACT	PHONE	PHONE
RELATION	ADDRESS	CITY/STATE/ZIP

APPLICANT QUESTIONNAIRE / AUTHORIZATION (Explain any "yes" answers below)

Has applicant ever been sued for bills?	☐ Yes	☐ No		Has applicant ever been locked out of their apartment by the sheriff?	☐ Yes	☐ No	
Has applicant ever been bankrupt?	☐ Yes	☐ No		Has applicant ever been brought to court by another landlord?	☐ Yes	☐ No	
Has applicant ever been guilty of a felony?	☐ Yes	☐ No		Has applicant ever moved owing rent or damaged an apartment?	☐ Yes	☐ No	
Has applicant ever broken a lease?	☐ Yes	☐ No		Is the total move-in amount available now (rent and deposit)?	☐ Yes	☐ No	

NOTES / EXPLANATIONS: _____

APPLICANT AUTHORIZES THE LANDLORD OR LANDLORD'S REPRESENTATIVE TO CONTACT PAST AND PRESENT LANDLORDS, EMPLOYERS, CREDITORS, CREDIT BUREAUS, NEIGHBORS AND ANY OTHER SOURCES DEEMED NECESSARY TO INVESTIGATE APPLICANT. BY SIGNING BELOW, APPLICANT CONFIRMS THAT ALL INFORMATION IS TRUE, ACCURATE, AND COMPLETE TO THE BEST OF APPLICANT'S KNOWLEDGE. LANDLORD RESERVES THE RIGHT TO DISQUALIFY TENANT IF INFORMATION IS NOT AS REPRESENTED.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME. THIS AUTHORIZATION SHALL EXPIRE WITHIN _____ CALENDAR DAYS (30, IF NOT FILLED IN) FROM THE DATE HEREOF.

X _____ _____

APPLICANT SIGNATURE DATE

PRINT NAME _____