



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 INFORMATION

FIRST NAME	MIDDLE	LAST	DRIVER'S LICENSE #	STATE
DATE OF BIRTH	MARITAL STATUS	SINGLE ☐ MARRIED ☐ Since DIVORCED ☐ Since		
PHONE	CELL ☐ HOME ☐	PHONE	EXT.	HOME ☐ WORK ☐
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? ☐ YES ☐ NO		
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? ☐ YES ☐ NO		
NEXT PREVIOUS HOME ADDRESS		CITY/STATE/ZIP		
LENGTH OF TIME	NEXT PREVIOUS LANDLORD	LANDLORD PHONE		
REASON FOR LEAVING	AMOUNT OF RENT	Was your rent up to date? ☐ YES ☐ NO		

PROPOSED OCCUPANT(S)

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S)

NAME	TYPE/BREED	☐ INDOOR ☐ OUTDOOR	AGE
NAME	TYPE/BREED	☐ INDOOR ☐ OUTDOOR	AGE
NAME	TYPE/BREED	☐ INDOOR ☐ OUTDOOR	AGE

VEHICLE(S) INFORMATION

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

EMPLOYMENT

CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE	EXT.
ADDRESS	CITY/STATE/ZIP	
CURRENT EMPLOYER	OCCUPATION	HOURS/WEEK
SUPERVISOR	PHONE	EXT.
ADDRESS	CITY/STATE/ZIP	

INCOME

CURRENT INCOME \$	☐ WEEKLY ☐ BIWEEKLY ☐ MONTHLY ☐ YEARLY	SOURCE	PROOF OF INCOME ☐ YES ☐ NO
CURRENT INCOME \$	☐ WEEKLY ☐ BIWEEKLY ☐ MONTHLY ☐ YEARLY	SOURCE	PROOF OF INCOME ☐ YES ☐ NO
CURRENT INCOME \$	☐ WEEKLY ☐ BIWEEKLY ☐ MONTHLY ☐ YEARLY	SOURCE	PROOF OF INCOME ☐ YES ☐ NO



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.

ADDITIONAL INFORMATION

CHILD SUPPORT/ OTHER CREDIT OWED	BALANCE OWED	MONTHLY PAYMENT	CREDIT PHONE #
-------------------------------------	-----------------	--------------------	-------------------

EMERGENCY / PERSONAL REFERENCE INFORMATION

EMERGENCY CONTACT	PHONE	☐ CELL ☐ HOME	PHONE	☐ HOME ☐ WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
EMERGENCY CONTACT	PHONE	☐ CELL ☐ HOME	PHONE	☐ HOME ☐ WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE	☐ CELL ☐ HOME	PHONE	☐ HOME ☐ WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE	☐ CELL ☐ HOME	PHONE	☐ HOME ☐ WORK
RELATION	ADDRESS		CITY/STATE/ZIP	

APPLICANT QUESTIONNAIRE / AUTHORIZATION

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

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant.
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.

X _____
APPLICANT SIGNATURE

DATE

If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person.

NOTES:
