

RENTAL APPLICATION

Property Applying For: _____
Requested Move-In Date: _____

Last Name: _____ First: _____ Middle: _____
SSN: _____ Drivers License: _____
Date of Birth: _____ Phone #: () _____
Email: _____

Current Address: _____
City _____ State: _____ Zip: _____
Landlord: _____ Phone # () _____
How long? From: _____ To: _____ Current Payment: _____
Reason for Leaving: _____

Previous Address: _____
City _____ State: _____ Zip: _____
Landlord: _____ Phone # () _____
How long? From: _____ To: _____ Current Payment: _____
Reason for Leaving: _____

Current Employment: _____
Street Address: _____
City _____ State: _____ Zip: _____
Supervisor: _____ Phone # () _____
How long? From: _____ To: _____
Income: _____ per ☐ Week ☐ Month ☐ Year

Previous Employment: _____
Street Address: _____
City _____ State: _____ Zip: _____
Supervisor: _____ Phone # () _____
How long? From: _____ To: _____
Income: _____ per ☐ Week ☐ Month ☐ Year

Bank Information:
Bank Name: _____
Address: _____
Account Type: _____
Open Since: _____

References:

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

Additional Occupants:

List ALL additional occupants - include age of minor children.

Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Pets: Description/Weight _____
Description/Weight _____

Have you ever been evicted? ☐ Yes ☐ No

If yes, explain _____

Foreclosure/Repossession? ☐ Yes ☐ No

Have you ever filed for bankruptcy? ☐ Yes ☐ No

If yes, explain _____

If yes, ☐ Chapter 7 ☐ Chapter 13

Have you been convicted of a felony? ☐ Yes ☐ No

If yes, explain _____

In case of emergency, name and address of two nearest relatives not living with you:

Name: _____ Address: _____
City: _____ State: _____ Zip: _____
Relationship: _____ Phone Number: () _____

Name: _____ Address: _____
City: _____ State: _____ Zip: _____
Relationship: _____ Phone Number: () _____

Signature: _____

Date: _____