

WHICH APARTMENT COMMUNITY ARE YOU APPLYING FOR?	RENTAL APPLICATION
	FOR OFFICE USE ONLY
	DATE _____ AGENT _____
	COMMUNITY _____
	APT. NO. _____ RENTS _____

Notice: Co-Applicant must complete a separate Rental Application Form

The undersigned hereby makes application to rent unit number _____ Located at _____
beginning on _____, at a monthly rental of \$ _____

PLEASE TELL US ABOUT YOURSELF

FULL NAME _____ **DOB** _____ **Sex** Female Male

SSN _____ **Driver's License** _____ **PHONE** _____
Number State

E-mail Address _____

Names of all other occupants

Total Number of Occupants

How Many Pets Do You Or Other Occupants Own? _____
Kind of Pet, Breed, Weight, and Age _____

PLEASE GIVE YOUR RESIDENCE HISTORY FOR THE PAST 3 YEARS (beginning with the most current)

CURRENT ADDRESS
Month & Year Moved In : _____ Moved Out : _____ Reason for Leaving : _____
Owner or Agent : _____ Phone : _____ Monthly Payment : _____

PREVIOUS ADDRESS (If within 3 years)
Month & Year Moved In : _____ Moved Out : _____ Reason for Leaving : _____
Owner or Agent : _____ Phone : _____ Monthly Payment : _____

PREVIOUS ADDRESS (If within 3 years)
Month & Year Moved In : _____ Moved Out : _____ Reason for Leaving : _____
Owner or Agent : _____ Phone : _____ Monthly Payment : _____

PLEASE GIVE YOUR EMPLOYMENT INFORMATION

YOUR STATUS : Employed Full-Time Employed Part-Time Student Retired Not Employed

CURRENT EMPLOYER (or most recent) _____
Address : _____ Phone : _____
Dates Employed : From _____ To _____ Position : _____
Supervisor _____ Gross Monthly Salary _____ Household Gross Monthly Income _____

PREVIOUS EMPLOYER _____
Address : _____ Phone : _____
Dates Employed : From _____ To _____ Position : _____
Supervisor _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for conformation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application

Amount \$ _____ Per _____ Source _____ Telephone _____

PLEASE LIST YOUR BANK AND CREDIT REFERENCES

YOUR BANK(S)	City-State/Branch	Acct. Number & Type	Telephone
1			
2			
YOUR CREDIT REFERENCES	City-State	Acct. Number	Telephone
1			
2			

TOTAL NUMBER OF VEHICLES (Including Company Vehicles) _____

Make/Model _____	Year _____	Color _____	Tag No./State _____
Make/Model _____	Year _____	Color _____	Tag No./State _____

Other Car, Motorcycle, etc. _____

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes No

Been evicted or asked to move out? Yes No

Been sued for damage to rental property? Yes No Declared bankruptcy? Yes No

Been convicted of a felony? Yes No

If yes, Date _____ Charge _____

Are you now or have you been anytime during this calendar year a full time student? Yes No

Please give any additional information that might help management evaluate your application:

Empty rectangular box for additional information.

How did you hear about our property? _____

If management has any questions about your application, please give Phone Numbers where you can be located:

Day Phone : _____ Night Phone : _____

IN CASE OF PERSONAL EMERGENCY, NOTIFY : _____ Relationship : _____

Full Address : _____

Phone No. : _____

I hereby state and represent that the information in this application is complete and accurate. I understand that in the event a lease is entered into it may be cancelled by the Landlord if any of the information provided in the application is materially inaccurate or incomplete. I hereby authorize the Landlord or Landlord's agents to verify the information on the application. Verification or re-verification of any information contained in the application will be retained by Landlord. I hereby authorize Tenant Data Services Inc. to obtain information about me, including, but not limited to, this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, and I hereby authorize and instruct any entity or person contacted by Tenant Data Services Inc. or the Landlord or Landlord's agents to release such information to them. Upon request, Landlord, Landlord's agents, or Tenant Data will provide the name and phone number of the source of the information used in the verification process. If I should cancel this application after two days from the date of application, the ENTIRE deposit will be retained as termination charges. All cancellations must be in writing.

Rent Amount: _____ Security Deposit: _____ Lease Term: _____ Move-in Date: _____

Applicant: _____

Date: _____



Non-Refundable Application Fee: \$30 per applicant



APPLICANT: PLEASE DO NOT WRITE BELOW

PAYMENT OF : \$ _____ RECEIVED BY (NAME) : _____ DATE : _____

THIS APPLICATION FORM RECEIVED BY (NAME) : _____ DATE : _____

THIS APPLICATION : **APPROVED** **NOT APPROVED**

BY : _____ Title : _____ Date : _____

If not approved, specify reason(s)

Empty rectangular box for reasons if not approved.

Applicant Notified By (Name) _____ Date Notified : _____

Notified by : LETTER FORM TELEPHONE FAX IN PERSON