



ALL QUESTIONS MUST BE ANSWERED OR THE APPLICATION WILL NOT BE PROCESSED.

Address Applying For: _____ Apt. # _____ Expected Move In Date _____

Does an organization assist you with your rent or other expenses? YES NO If yes, who? _____

Rent \$ _____ Deposit \$300 Eff / \$400 1Bdrm / \$500 2Bdrm / \$600 3 Bdrm(circle 1)/Other \$ _____ Who Quoted Prices? _____

Why are you moving? _____ Have you ever rented before? [] YES [] NO

Answer All Questions Below - If answering "YES" to any give details on back. Has any signer ever been:

Evicted? [] YES [] NO Or had an eviction started/stopped? [] YES [] NO Guilty of a felony? [] YES [] NO

Placed in collection for any kind of bill? (medical, car loan, student loan, credit card etc.) [] YES [] NO Bankrupt? [] YES [] NO

At your current address:

Have you given 30 Days notice that you are moving? [] YES [] NO Are you on a month to month lease? [] YES [] NO

Have you been asked or told to leave? [] YES [] NO Is your current rent paid? [] Yes [] NO

PRINT FULL NAMES – Include Middle Initial

Applicant's Full Name: _____

Co-Applicant's Full Name: _____

D.O.B: ____/____/____ S.S.#: ____ - ____ - ____

D.O.B: ____/____/____ S.S.#: ____ - ____ - ____

Income: \$ _____ Weekly / Bi-Weekly / Monthly

Income: \$ _____ Weekly / Bi-Weekly / Monthly

Phone: _____ Text: Yes / No

Phone: _____ Text: Yes No

Email: _____ Email: _____

Current/Address Landlord Information

Current Address: _____ \$ _____ / _____
Street Address / City / State / Zip Code Rent Per Month Move In Date

Current Landlord: _____ Phone # _____

Are you related to this landlord: YES / NO How?

Previous Address/Landlord Information

Previous Address: _____ \$ _____ From ____/____/____ to ____/____/____
Street Address / City / State / Zip Code Rent Per Month Dates you lived there

Previous Landlord: _____ Phone # _____

Are you related to this landlord: YES / NO How?

Current/Previous Employment Information

Applicant's Employer: _____ / _____
Start Date

Co-Applicant's Employer: _____ / _____
Start Date

Address _____
What do you do? _____ Hours Per Week _____
Supervisor _____ Phone _____

Address _____
What do you do? _____ Hours Per Week _____
Supervisor _____ Phone _____

Applicants Previous's Employer: _____
Dates From/To

Co-Applicant's Previous Employer: _____
Dates From/To

Address _____
What did you do? _____
Supervisor _____ Phone _____

Address _____
What did you do? _____
Supervisor _____ Phone _____

Answer All Questions Below

Cars: Make _____ Model _____ Year _____ Tag# _____ Loan on Auto with _____

Total # To Live in Unit _____ Names of all _____

Pets (where allowed) [] Yes [] No If yes give Name/Size/Breed of all _____

Were You Referred? [] Yes [] No- If yes, by whom _____ If No, How Did You Hear About Us: _____

Applicant's Emergency Contact: _____

Co-Applicant's Emergency Contact: _____

ALL APPLICANTS MUST SIGN AFTER READING

This space is for you to provide additional information regarding your credit history, landlord/rental history, work history, etc. No verbal information will be considered, all information must be in writing:

**READ THE FOLLOWING BEFORE SIGNING.
APPLICATIONS MUST BE SIGNED OR THEY WILL NOT BE PROCESSED**

It is understood that the **\$50.00 fee for application processing is not refundable**. If this application is approved the **\$100.00 partial deposit** shall be held by the landlord as a partial security deposit. The balance of the deposit must be paid at the lease signing. If applicant(s) are approved for residency and do not enter into a rental agreement for the rental unit described on this application, or another rental unit owned or managed by landlord/agent, the deposit shall be forfeit as liquidated damages and not refunded. If this application is not accepted the deposit shall be returned to the undersigned, via check made payable to all applicants, using regular U.S. mail. By signing below all applicants waive any claim for damages for non-acceptance of this application which may be rejected without any stated reason. All applicants authorize anyone to investigate the facts, obtain and exchange information and reports regarding this application or resulting account(s) with credit reporting agencies and any others deemed necessary by landlord. On request applicants will be told each agencies name and address. ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM, A PHOTOCOPY, OR SCAN OF THIS FORM, AT ANY TIME.



X _____ Date: _____
Applicant Signature

Print Full Name With Middle Initial: _____

X _____ Date: _____
Co-Applicant Signature

Print Full Name With Middle Initial: _____