

THE PROPERTY

COMPLEX NAME		ST. NO.		ST. NAM	1E		UNIT #
PARKING SPACE #	STORAGE SPACE #		CITY	INAIV	1L	STATE	ZIP
RENTAL RATE \$	PER	UTILITIE INCLUD			SECURITY DEPOSIT \$	INTENDED START DATE	

Instructions to Applicant:

Use <u>black ink</u>. Except for your signature, all information in this Application must be PRINTED in a clear and legible manner.

Each intended adult occupant must fill out one Application ENTIRELY and COMPLETELY. Each Applicant must show satisfactory identification to owner/manager at the time this Application is submitted for processing.

WARNING: This Application may be refused and/or rejected if it is not signed, complete, or legible; if satisfactory identification is not presented; if any information is false, can not be verified, or does not meet predetermined requirements; if additional information is requested from Applicant and is refused; or a Co-Applicant is rejected.

(Your Home Phone (Your Cell Pho	one ()	our Work Phone	_	
	APPLICANT'S PERSONAL DATA					
Ī	FULL NAME: FIRST - MIDDLE - LAS	T - GENERATION	SOCIAL SECURITY	DRIVER LICE	ENSE	STATE
Ī			E-MAIL ADDR	ESS	BIRTH	DATE
	ALL OTHER NAMES BY WHICH					

OTHER PERSONS TO OCCUPY THE PROPERTY

FULL NAME	RELATIONSHIP	AGE	OCCUPATION

1 RESIDENCE HISTORY

		DATES MOVED	RENT PAID	OWNER/MANAGER PHONE NUMBER	REASON FOR LEAVING					
(PRESENT) STREET			IN	\$	NAME					
CITY	STATE	ZIP	OUT	PER MONTH	PHONE ()					
(PRIOR) STREET			IN	\$	NAME					
CITY	STATE	ZIP	OUT	PER MONTH	PHONE ()					
(PRIOR) STREET			IN	\$	NAME					
CITY	STATE	ZIP	OUT	PER MONTH	PHONE ()					

2 EMPLOYMENT HISTORY

COMPANY NAME	ADDRESS	POSITION OR OCCUPATION	START DATE	SUPERVISOR TELEPHONE	SALARY OR WAGE
				NAME	\$
(PRESENT)				PHONE ()	PER MONTH
				NAME	\$
(SECOND PRESENT)				PHONE ()	PER MONTH
				NAME	\$
(PRIOR)				PHONE ()	PER MONTH

3 BANKING INFORMATION

BANK / S&L	BRANCH ADDRESS	PHONE NUMBER	ACCOUNT NUMBERS	DATES OPENED	PRESENT BALANCE
		()	CHECKING:		\$
			SAVINGS:		\$
		()	CHECKING:		\$
			SAVINGS:		\$

4 PERSONAL REFERENCE	CES (NOT RELATED)												
NAMES				ADDRESSES			TELEP	HONE	HOW LONG ACQUAINTED	OCCUPATION			
STREET					(()							
	STREET						()						
5 NEADEST DELATIVE (I	I)		STATE	ZIP									
5 NEAREST RELATIVE (NOT LIVING WITH YOU) FULL NAME				TONSHIP				ADDRESS		P	HONE		
										()			
6 IN CASE OF EMERGEN	ICY NOTIFY												
FULL NAME				TIONSHIP ADDRESS						PHONE ()			
										,			
7 CREDIT ACCOUNTS AI COMPANY NA			5, F	ACCOUNT		S, ETC.)		RCHASED	DATE	MONTHLY		SENT	
ADDRESS	3			ACCOUNT	NUMBER		OR AMOUN	T BORROWED	OPENED	PAYMENT	BAL	ANCE	
NAME										\$	\$		
ADDRESS													
NAME										\$	\$		
ADDRESS 8 AUTOMOBILES													
MAKE	MODEL	YE	AR	COLOR	LICEN	ISE NO.	LIC. ST.	LEGAL	OWNER	INSURA	ANCE CO.		
9. HAS ANY CIVIL JUDGMENT BEEN ENTE	DED ACAINST YOU FOR THE	COLLEG	TION	LOE A DERT II	I THE DACT	TEN (40) V	TABES				YES	NO	
10. DO YOU HAVE OR INTEND TO HAVE WA					N INE PASI	1EN (10) 11	ARS						
11. DO YOU HAVE OR INTEND TO HAVE AN													
12. HAVE YOU FILED FOR BANKRUPTCY IN 13. HAVE YOU EVER BEEN EVICTED OR RE			ON?										
14. HAVE YOU, OR DO YOU INTEND TO, POS					N OR ABOU	T YOUR RES	SIDENCE?						
15. HAVE YOU EVER BEEN ARRESTED FOR													
16. IF ANY QUESTION 9 THROUGH 15 IS AN	SWERED "TES", PLEASE EX	PLAIN F	JLLT	•									
							,						
17. HOW DID YOU HEAR OF THIS VACANCY	(?						18. IF AC	CEPTED, HOW L	ONG DO YOU EXP	ECT TO STAY?			
The undersigned Applica													
It is understood that this A										ts to said p	ropert	y until	
a written or oral Rental Ag										., ,			
A non-refundable credit ch												as	
earnest money will be give											ما لمصنات	41==	
The Application Deposit is owner/manager prior to a													
Application is then to be													
revocation shall be deeme													
the Rental Agreement/Lea	ase shall be dee	emed	а	breach	of con	tract. I	n eithe	r case, th	e Applicat	ion Deposi	t shall	then	
become nonrefundable to													
losses incurred as result of								and lost re	ent until th	e property i	s re-re	ented.	
Otherwise, the Application Deposits and payments ma	•	-				-	-	olioont oar	oog that no	rofund no	nd ha	mada	
prior to ten (10) working da													
Applicant represents all inf	•												
upon said information when											-	-	
cant hereby authorizes ow													
phone, fax, or otherwise, t													
owner/manager, his/her/its	• •									-	-		
firms or persons investigati	ing or supplying in	nform	ati	on, from	any lia	bility w	hatsoe	ver concer	ning the re	lease and/c	r use	of said	
information and further, wi													
private, of any such information													
they have concerning App													
blameless and without any	liability whatsoe	ver. A	CC	opy, fax,	or othe	er repro	duction	n of this Au	ıthorizatior	shall be as	effec	tive as	
the original.													
	V												

NOTICE: The rental for which you are applying may be reported to and monitored by various Consumer Credit Reporting Agencies. Your failure to satisfactorily perform your rental obligations may result in a derogatory entry in your rental and/or credit consumer file and could hamper your ability to obtain housing and/or credit in the future. In addition, owner/manager may report any and all information to other property owners/managers, credit grantors and/or public agencies.

Applicant's signature

Applicant's name PRINTED

Dated