



**RENTAL APPLICATION**  
**(FOR EVERY APPLICANT AGE 18 OR OLDER)**

Today's date: \_\_\_\_\_ Occupancy date desired \_\_\_\_\_

Rental Price Range \_\_\_\_\_ Type/Size required \_\_\_\_\_

Address interested in: \_\_\_\_\_

**Applicant's Personal Information**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Driver's Lic. #/State: \_\_\_\_\_

Social Security # \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**PHONE NUMBER** \_\_\_\_\_

Additional Occupants (List every occupant's name and their relationship below);

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_
- 6. \_\_\_\_\_

Do you have renter's insurance? \_\_\_\_\_ YES \_\_\_\_\_ NO

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Office Only:

# of Applicants \_\_\_\_\_  
Date received holding deposit \_\_\_\_\_  
Amount of holding deposit \_\_\_\_\_

Pets: \_\_\_\_\_  
Primary: \_\_\_\_\_  
Acceptance YES NO

Have you ever broken a Lease? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever refused to pay rent for any reason \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever had eviction procedures filed against you or been asked to leave a rental unit? \_\_\_\_\_ Yes \_\_\_\_\_ No

Ever filed for bankruptcy? \_\_\_\_\_ Yes \_\_\_\_\_ No

Ever been charged of a crime? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you give us permission to do a criminal background check? \_\_\_\_\_ Yes \_\_\_\_\_ No

Currently have any utilities in your name? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is there anything to prevent you from placing utilities in your name? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you know of anything or any reason which may interrupt your ability to pay rent? \_\_\_\_\_ Yes \_\_\_\_\_ No

## Residence History

Present street address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Dates lived at this address: \_\_\_\_\_ Own: \_\_\_\_\_ Rent: \_\_\_\_\_ Occupy \_\_\_\_\_

How many pets do you have? \_\_\_\_\_ Type: \_\_\_\_\_

Name of present landlord/owner/mortgage company: \_\_\_\_\_

Landlord's Phone: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Is your rent/mortgage current? \_\_\_\_\_ Yes \_\_\_\_\_ No

Number of late Payments: \_\_\_\_\_ Security deposit amount currently held by landlord: \_\_\_\_\_

\*Previous residence address: \_\_\_\_\_

Previous Landlord : \_\_\_\_\_ Previous landlord phone: \_\_\_\_\_

Dates at this address: \_\_\_\_\_ Reason for moving? \_\_\_\_\_

Was your full security deposit returned? \_\_\_\_ Yes \_\_\_\_ No

Number of late payments: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

## Income History

Applicant's current employment status:

\_\_\_\_ Full-Time

\_\_\_\_ Part-Time (Less than 32 hours)

\_\_\_\_ Student

\_\_\_\_ Self-employed

\_\_\_\_ Unemployed

\_\_\_\_ Other (describe): \_\_\_\_\_

## Primary source of employment:

Applicant employed by: \_\_\_\_\_ Supervisor's name: \_\_\_\_\_

Average weekly hours: \_\_\_\_ How long at this place of employment: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Please indicate **weekly, monthly, annual average -take home**: \_\_\_\_\_

## Additional Income/Payment Information

In the event of some emergency that would prevent you from paying the rent when due, is there a relative, person or agency that could assist you with rent payments? \_\_\_\_ Yes \_\_\_\_ No

1st emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ 2nd Phone: \_\_\_\_\_

2nd emergency contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ 2nd Phone: \_\_\_\_\_

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's rent?

\_\_\_\_ Yes \_\_\_\_ No

### **Additional income (optional)**

If there are additional, verifiable sources of income you would like considered, please list income sources (e.g. self-employment, social security, benefit payments), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony or separation maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional source: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ Per: \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

How long have you been receiving income from this source: \_\_\_\_\_

How long do you expect this income to continue? \_\_\_\_\_

Is there any reason it would stop: \_\_\_\_\_

### **Vehicles**

Number of vehicles on property? \_\_\_\_\_ Valid registration? \_\_\_\_\_

Do you have any commercial vehicles, RV, campers, boats or motorcycles? \_\_\_\_\_

Vehicle 1 (**make/model/color/year**) \_\_\_\_\_

**Please note, only cars on application are authorized to be on premises.**

Plate number: \_\_\_\_\_ Financed /leased through: \_\_\_\_\_

Contact and phone number: \_\_\_\_\_

Monthly payment: \_\_\_\_\_

Vehicle 2 (**make/model/color/year**): \_\_\_\_\_

Plate number: \_\_\_\_\_ Financed/leased through: \_\_\_\_\_

Contact and phone number: \_\_\_\_\_

Monthly payment: \_\_\_\_\_

List any current monthly expenses:

\_\_\_\_\_ Hospital Payment

\_\_\_\_\_ Health Insurance

\_\_\_\_\_ Auto Insurance

\_\_\_\_\_ Child Care

\_\_\_\_\_ Tuition

\_\_\_\_\_ Cable TV/internet/phone

\_\_\_\_\_ Other

\_\_\_\_\_ Credit Cards/Loans

### **Personal/Professional References**

Character/person reference:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Relationship: \_\_\_\_\_ How Long: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of nearest living relative:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Do you give owner or manager permission to contact references listed above both now and in the future for rental consideration or for collection purposes, should they be deemed necessary? \_\_\_\_\_ Yes \_\_\_\_\_ No

If management has a question regarding application, please furnish best contact phone number.

Day Phone: \_\_\_\_\_ Night Phone: \_\_\_\_\_

# THANK YOU !!

Thank you for completing an application to rent from us . Please sign below. Please note that a completed application requires submission of the following, which will be copied and attached to this application:

\_\_\_\_\_ Driver's license or picture ID. **Note: Rentals will not be shown without picture ID.**

\_\_\_\_\_ 2 weeks most current pay stubs of each source listed

\_\_\_\_\_ If self-employed, most current Schedule C tax return and proof of current income.

A fee is charged on all rental application for the purpose of verifying the information furnished on this application. By signing below, applicant hereby represents all information on this application is true, complete and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is non-refundable.

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and misleading statements will be sufficient reason for immediate eviction and loss of security deposit.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's printed name: \_\_\_\_\_