

RENTAL APPLICATION

PERSONAL INFORMATION

| | | | |
|--|--|--|-------|
| FIRST NAME | MIDDLE | LAST | S.S.# |
| DATE OF BIRTH / / | MARITAL STATUS <input type="checkbox"/> Single <input type="checkbox"/> Married | DRIVERS LICENSE # STATE | |
| PHONE <input type="checkbox"/> CELL <input type="checkbox"/> HOME | PHONE <input type="checkbox"/> CELL <input type="checkbox"/> HOME | | |
| CURRENT ADDRESS | | CITY/STATE/ZIP | |
| LENGTH OF TIME | | NAME AND PHONE NUMBER OF PREVIOUS LANDLORD | |
| E-MAIL ADDRESS | | | |

OCCUPANT(S)

| | | | |
|------|--------------|------------|-----|
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |

PET(S)

| | | | |
|------|------------|--|--------|
| NAME | TYPE/BREED | <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor | WEIGHT |
| NAME | TYPE/BREED | <input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor | WEIGHT |

VEHICLE(S) INFORMATION

| | | | | |
|------------|----------------|----------------|---------|---------------|
| MAKE/MODEL | PAYMENT AMOUNT | COLOR | PLATE # | STATE |
| YEAR | MAKE/MODEL | PAYMENT AMOUNT | COLOR | PLATE # STATE |

EMPLOYMENT/INCOME PROVIDER

| | | |
|------------------|------------|----------------|
| CURRENT EMPLOYER | OCCUPATION | HOURS/WEEK |
| Monthly Income | PHONE | YEARS EMPLOYED |
| ADDRESS | | CITY/STATE/ZIP |
| CURRENT EMPLOYER | OCCUPATION | HOURS/WEEK |
| Monthly Income | PHONE | YEARS EMPLOYED |
| ADDRESS | | CITY/STATE/ZIP |

REFERENCE INFORMATION

| | | |
|--------------|--|--|
| REFERNECE #1 | PHONE <input type="checkbox"/> CELL <input type="checkbox"/> HOME | PHONE <input type="checkbox"/> CELL <input type="checkbox"/> HOME |
| RELATION | ADDRESS | CITY/STATE/ZIP |

APPLICATION

What properties are you applying for (list addresses)?

Planned Move in Date?

I authorize the verification of the information provided on this form as to my credit and employment.

| | |
|----------------------------|------|
| Signature of applicant: | Date |
| Signature of co-applicant: | Date |