



TENANT APPLICATION

All occupants over 18 must complete a separate application.

Applications must be fully completed. If an item does not apply, please write "N/A" as your response.

PROPERTY ADDRESS: _____ REQUESTED MOVE-IN DATE: _____

APPLICANT:

Last Name: _____ First: _____ Middle: _____ Maiden: _____ Married _____ Single _____

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

Email Address: _____ Fax Number: (____) _____

Soc. Sec. No. _____ Drivers Lic. _____ State: _____ Date of Birth: ____/____/____

RESIDENT HISTORY:

Current Address: _____ Apt.# _____ City: _____ State: _____ Zip _____

Dates lived at address: From _____ To _____ Reason for Leaving: _____ Rent/Mtg Amt: _____

Name of Landlord (Company & Person): _____ Landlord Phone: (____) _____

Previous Address: _____ Apt.# _____ City: _____ State: _____ Zip _____

Dates lived at address: From _____ To _____ Reason for Leaving: _____ Rent/Mtg Amt: _____

Name of Landlord (Company & Person): _____ Landlord Phone: (____) _____

Previous Address: _____ Apt.# _____ City: _____ State: _____ Zip _____

Dates lived at address: From _____ To _____ Reason for Leaving: _____ Rent/Mtg Amt: _____

Name of Landlord (Company & Person): _____ Landlord Phone: (____) _____

Please list any other additional occupants: *(Please use reverse of form for additional occupants as necessary)*

Name	Relation	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY: *(If you are self employed, please provide profit & loss statement & two prior years' tax returns)*

Employer: _____ Address: _____

Position: _____ Supervisor's Name: _____ Phone: (____) _____

Monthly GROSS Income: _____ Dates Employed at this Job: From _____ To _____

Please attach the most recent four weeks pay stubs



Former Employer: _____ Address: _____

Position: _____ Supervisor's Name: _____ Phone: (____) _____

Monthly GROSS Income: _____ Dates Employed at this Job: From _____ To _____

Reason for Leaving: _____

Former Employer: _____ Address: _____

Position: _____ Supervisor's Name: _____ Phone: (____) _____

Monthly GROSS Income: _____ Dates Employed at this Job: From _____ To _____

Reason for Leaving: _____

Other Source(s) of Income for Rental Payment: _____

PERSONAL INFORMATION:

Have you or any household member ever broken a rental agreement? Yes _____ No _____

Have you ever been evicted from a rental dwelling? Yes _____ No _____

Have you ever been placed with a collection company for a landlord or utility account balance? Yes _____ No _____

Have you ever been more than 20 days late on your rent or mortgage payment? Yes _____ No _____

Have you or any household member ever filed a petition for bankruptcy? Yes _____ No _____

Have you or any household member ever been evicted from any tenancy? Yes _____ No _____

Have you or any household member ever had a restraining order against you? Yes _____ No _____

Do you or any household member use or manufacture illegal drugs? Yes _____ No _____

Do you or any household member engage in the distribution or sale of illegal drugs? Yes _____ No _____

Do you or any household member have any outstanding warrants for your arrest? Yes _____ No _____

Have you are any household member ever been or currently are a member of a gang? Yes _____ No _____

Do you or any household member use any tobacco products? Yes _____ No _____

Have you or any household member ever been convicted of any felony or misdemeanor relating to arson, assault, intimidation, sex crimes, drug-related offenses, theft, dishonesty, prostitution, or related violations or any crime related to harm caused to a person or property? Yes _____ No _____

If yes to any of the above, you must provide an explanation. (Use the back of application if more space is needed):

PETS: (No pets are allowed that are not listed on this application, nor are pets allowed without prior written approval)

Will a pet or assistive animal of any type live at your residence? Yes _____ No _____ If yes, please describe:

Type: _____ Age: _____ Breed: _____ Weight (full grown): _____ Spayed/Neutered? _____

Type: _____ Age: _____ Breed: _____ Weight (full grown): _____ Spayed/Neutered? _____

Has any of the above mentioned animals ever bitten or attacked anyone? Yes _____ No _____

Do you have a fish tank? Yes _____ No _____ If yes, please describe: _____



VEHICLES: (If more than two vehicles are owned, please use reverse of form for additional vehicles)

Make/Model	Year	Color	License Plate	State
Vehicle: _____				
Vehicle: _____				

Description of any other vehicle (boat, trailer, truck, recreational vehicle, etc) you would like to keep on the property: (Prior written permission separate from the Application must be obtained from management for such vehicles).

CREDIT & FINANCIAL REFERENCES: (Bank Accounts, Credit Cards, Charge Accounts)

Bank/Financial Acct	Acct #	Bank/Institution	Branch
Savings Account: _____			
Checking Account: _____			
Other Account: _____			

Credit Accts & Loans	Type of Account (Auto Loan, Visa, etc)	Account Number	Name of Creditor	Amount Owed	Monthly Payment
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Credit Card: _____

Credit Card: _____

Loan (mortgage, student loan, car, etc): _____

Loan (mortgage, student loan, car, etc): _____

Other Major Obligation: _____

PERSONAL REFERENCES: (Persons who can provide a character reference):

Name: _____	Name: _____
Relationship: _____	Relationship: _____
Address: _____	Address: _____
City/State: _____ Zip code: _____	City/State: _____ Zip code: _____
Work Phone: _____ Home Phone: _____	Work Phone: _____ Home Phone: _____
Email Address: _____	Email Address: _____

EMERGENCY CONTACT: (Persons to notify and persons you authorize to take possession of your personal property in case of an emergency. Emergency contacts should be different than personal references above and NOT someone who will be living in the residence with you.

Name: _____	Name: _____
Relationship: _____	Relationship: _____
Address: _____	Address: _____
City/State: _____ Zip code: _____	City/State: _____ Zip code: _____
Work Phone: _____ Home Phone: _____	Work Phone: _____ Home Phone: _____
Email Address: _____	Email Address: _____

*Management is not responsible for damage to resident's property unless caused by negligence on the part of management or an employee of management. Residents are strongly advised to obtain renter's insurance to cover loss or damage to their property.



Applicant understands that occupancy is limited to only those names on this application and occupancy is contingent upon approval of the application by the Management Company. Applicants must pay the non-refundable credit & background check processing fee of \$35 per adult / applicant.

Applicant understands that the information herein is submitted as representation for the procurement of occupancy and recognized that if any information is discovered to be false, the application can be rejected, the lease can be voided and deposits forfeited, all at the Manager's option.

Applicant authorizes verification of all information on this application including but not limited to credit checks, employment verification, criminal background checks, and rental history reports.

In the event applicant is accepted, the earnest funds will be required to be paid within 24 hours in order to secure the property and take possession. In the even the applicant fails to enter into a lease agreement or fails to take occupancy on the date specified or changes their decision on occupancy, for whatever reason, the earnest monies will be forfeited as liquidated damages and retained by Management.

The preparation and execution of this application does not in any way create a tenancy between the applicant and the management Company nor any interest by the applicant in the rental property. This Application is preliminary only and does not obligate owner or owner's representatives to execute a lease or deliver possession of the proposed premises.

Print Name: _____

Applicant's Signature: _____ Date: _____