

**RENTAL APPLICATION**  
**\$20.00 application fee upon appointment scheduled**

**NOTICE:** Co-Tenant must complete a separate Rental Application Form.

The undersigned hereby makes application to rent \_\_\_\_\_ **LLC**

**PLEASE TELL US ABOUT YOURSELF**

FULL NAME: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

Name of Co-Tenant: \_\_\_\_\_

Number of Children \_\_\_\_\_ Age of Children: \_\_\_\_\_

Other Occupants and Their Relationships: \_\_\_\_\_

Pets (Number and Kind) (Discretionary) \_\_\_\_\_

**LANDLORD REFERENCES**  
**(BEGINNING WITH MOST CURRENT – TWO REQUIRED)**

**CURRENT ADDRESS:** \_\_\_\_\_

Month & Year Moved In: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Owner or Agent: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

**PREVIOUS ADDRESS:** \_\_\_\_\_

Month & Year Moved In: \_\_\_\_\_ Moved Out: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Owner or Agent: \_\_\_\_\_

**HAVE YOU EVER:** Filed for Bankruptcy? \_\_\_\_\_ No. \_\_\_\_\_ Yes Year \_\_\_\_\_

Been evicted from tenancy? \_\_\_\_\_ No. \_\_\_\_\_ Yes Year \_\_\_\_\_

Charged or Convicted of a

Felony Crime? \_\_\_\_\_ No. \_\_\_\_\_ Yes Year \_\_\_\_\_

Willfully or intentionally

Refused to pay rent when due or

Terminated a lease without notice? \_\_\_\_\_ No. \_\_\_\_\_ Yes Year \_\_\_\_\_

Please give any additional information which might help management evaluate this application:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PERSONAL REFERENCES**

<u>NAME:</u>	<u>ADDRESS:</u>	<u>PHONE NO.:</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

SHOULD MANAGEMENT HAVE ANY QUESTIONS ABOUT THIS APPLICATION, PLEASE GIVE PHONE NUMBERS WHERE YOU CAN BE LOCATED:

DAY PHONE: \_\_\_\_\_ NIGHT PHONE: \_\_\_\_\_

CELL: \_\_\_\_\_

Applicant recognizes that the Rental Application is being completed for purposes of owner determining whether applicant is a suitable candidate to rent the premises. If this application is not approved and accepted by the owner or owner's agent, the deposit will be refunded to applicant.

If the Application is accepted, applicant shall, within 24 hours of notification by owner of acceptance, deposit all deposits required and an appropriate lease will be prepared for signature by applicant. Applicant further understands that prior to occupancy of the premises, the first month's rent must be paid.

**I recognize that as a part of the procedure for processing this application, an investigative consumer report may be ordered. Information may be obtained through personal interviews with neighbors, friends, landlords and other individuals with whom applicant is acquainted or who are listed herein as references. This inquiry shall include information as to character, general reputation, personal characteristics, mode of living and any other information deemed by owner to be useful as part of the decision making process as to whether to accept the within applicant's application.**

**EMPLOYMENT REFERENCES**

**YOUR STATUS:**    \_\_\_\_\_ Employed Full-time                      \_\_\_\_\_ Employed Part-time  
                                 \_\_\_\_\_ Student                      \_\_\_\_\_ Retired                      \_\_\_\_\_ Unemployed

**EMPLOYER:**    \_\_\_\_\_ Current; \_\_\_\_\_ Previous \_\_\_\_\_  
Date(s) Employed: \_\_\_\_\_ Employed As: \_\_\_\_\_  
Supervisor: \_\_\_\_\_ Supervisor's Phone: ( \_\_\_\_\_ ) \_\_\_\_\_  
Address: \_\_\_\_\_  
Salary: \$ \_\_\_\_\_ per \_\_\_\_\_ if employed by above less than six months, give  
name and address of Previous Employer or School \_\_\_\_\_  
\_\_\_\_\_

If there are other sources of income you would like to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount: \$ \_\_\_\_\_ Source: \_\_\_\_\_

**BANK AND CREDIT REFERENCES**

**YOUR BANK(S):** \_\_\_\_\_ **CITY/STATE:** \_\_\_\_\_  
**BRANCH:** \_\_\_\_\_ **Type of Account:** \_\_\_\_\_

<u><b>CREDIT REFERENCES:</b></u>	<u><b>City-State:</b></u>	<u><b>Account Number:</b></u>
_____	_____	_____
_____	_____	_____

**YOUR DRIVER'S LICENSE #:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**YOUR VEHICLE MAKE/MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **TAG #:** \_\_\_\_\_

**2<sup>ND</sup> VEHICLE MAKE/MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **TAG #:** \_\_\_\_\_

**OTHER VEHICLE MAKE/MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_ **TAG #:** \_\_\_\_\_

It is understood by me, by affixing my signature to this document, I hereby give authorization and consent to check my credit ratings, as well as any criminal records held by any Local or State Police Department, and to contact any named references.

**THIS ABOVE INFORMATION, INCLUDING ALL STATEMENTS HEREIN, IS TRUE AND CORRECT AND ANY INCORRECT, FALSE OR MISLEADING INFORMATION SHALL RESULT IN AN IMMEDIATE REJECTION OF APPLICANT'S APPLICATION.**

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE SIGNED

\_\_\_\_\_  
EMAIL