



APPLICATION TO RENT

TENANT CO-TENANT GUARANTOR/CO-SIGNOR



Property Address _____ City _____ State _____ Zip _____

PERSONAL INFORMATION

Mr. Mrs. **Marital Status:** Married Single Unmarried Divorced Widowed Separated

First Name: _____ Mother's Maiden Name: _____

Middle Name: _____ Driver's License #: _____ State: _____

Last Name: _____ Social Security Number: _____ - _____ - _____

AKA /Nickname: _____ Email Address: _____

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

Date of Birth: MM/DD/YYYY _____ Place of Birth (City, ST, Country) _____

OTHER PROPOSED OCCUPANTS (Including Minors) ALL OCCUPANTS OVER 18 YEARS OF AGE OF 18 MUST COMPLETE A SEPARATE APPLICATION

First Name	Middle Initial	Last Name	Relationship	M/F	Social Security Number	Date of Birth

ADDRESS HISTORY (10 Years)

Current Address _____ Unit # _____ Own Rent
City _____ State _____ Zip Code _____ Country _____
From ____ | ____ | ____ To ____ | ____ | ____ Monthly Payment/Rental Amount \$ _____
Landlord/Manager Name: _____ Phone: () _____
Reason for leaving this address _____

Previous Address _____ Unit # _____ Own Rent
City _____ State _____ Zip Code _____ Country _____
From ____ | ____ | ____ To ____ | ____ | ____ Monthly Payment/Rental Amount \$ _____
Landlord/Manager Name: _____ Phone: () _____
Reason for leaving this address _____

Previous Address _____ Unit # _____ Own Rent
City _____ State _____ Zip Code _____ Country _____
From ____ | ____ | ____ To ____ | ____ | ____ Monthly Payment/Rental Amount \$ _____
Landlord/Manager Name: _____ Phone: () _____
Reason for leaving this address _____

Auto Make _____ Model _____ Year _____ Color _____ Lic. # _____ State _____
Auto Make _____ Model _____ Year _____ Color _____ Lic. # _____ State _____
Pets Number & Type: _____ Weight: _____

FINANCIAL INFORMATION (Use extra sheet if necessary)

NAME OF CREDITOR	ACCOUNT NUMBER	MONTHLY PAYMENT	BALANCE DUE

NAME OF BANK BRANCH	ACCOUNT NUMBER	TYPE OF ACCOUNT	ACCOUNT BALANCE

PERSONAL REFERENCES AND RELATIVES

NAME	RELATIONSHIP	ADDRESS	PHONE	KNOWN SINCE

EMERGENCY CONTACT

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EMPLOYMENT INFORMATION (Last 10 Years)

Current Employer: _____ Address: _____
 City _____ State _____ Zip Code _____ Position or Title: _____
 Employed Since ____ | ____ | ____ Monthly Gross Income \$ _____
 Supervisor Name: _____ Phone: (____) _____ Verify Employment: (____) _____

Previous Employer: _____ Address: _____
 City _____ State _____ Zip Code _____ Position or Title: _____
 Employed From ____ | ____ | ____ To ____ | ____ | ____ Monthly Gross Income \$ _____
 Supervisor Name: _____ Phone: (____) _____ Verify Employment: (____) _____

Have you ever: Been Convicted of a Crime? Been Evicted? Filed for Bankruptcy? Broken a Lease?

Applicant represents that statements made are true and correct and hereby authorize verification of references to include but not limited to credit checks, unlawful detainer checks, telecheck and agrees to furnish additional credit references upon request. Applicant agrees to pay for said which is a part of the application process and is charge for the administrative costs of application consideration.

Applicant Signature _____ Date _____ Time _____

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