Application to Lease

Please Print

Each Applicant over the age of 18 must complete an application form

First, Middle, Last Name	Date of Birth	Social Security #	Driver's License #
Other Names Used in the Last 10 Years			

Additional Occupants List everyone, who will live with you:

First, Middle, Last Name	Relationship to Applicant		

Employment

	Current Employment	Prior Employment
Employer		
Address		
Employer Phone		
Job Title		
Name of Supervisor		
Dates of Employment	From: To:	From: To:
Gross Monthly Income	\$	\$

Residence

	Current Residence	Previous Residence	Previous Residence
Street Address			
City			
State and Zip			
Dates of Stay		to	to
Owner / Manager and Phone Number			-
Reason For Leaving			
Last Rent Paid	\$	\$	\$

Vehicles

Automobiles	Make	Model	Color	Year	License No.
Motorcycles					

Personal References					
In Case of	Address / City		Phon	е	Relationship
Emergency, Notify					
Close Friend					
Close i fieria					
Nearest Relative					
Living Elsewhere					
General Information Ci	rcle answer that applies				
Do you smo	nke?		Yes	No	
Do you have			Yes	No	
	ver filed for bankruptcy?		Yes	No	
,	e any musical instruments		Yes	No	
	e any water-filled furniture				
<u> </u>	vater filled furniture? been convicted for selling,	Yes	No		
	uting or manufacturing				
	victed of any other crime?	Yes	No		
	ver been evicted for non-p				
of rent or any other	reason?	Yes	No		
Please explain any "yes" a	nswers to the above ques	tions:			
Why are you leaving your	current residence?				
The applicant hereby appli	es to lease Apartment #	2		at	er month, and upon owner's quired before occupancy.
approval, agrees to enter i	nto a Lease and pay all re	nt and se	curity c	pe leposits red	quired before occupancy.
An application fee of \$ application, to obtain credi	ist t history and other backgro	s hereby ound info	submitt rmation	ed for the c	cost of processing this
hereby authorizes verific previous landlords and e agent to obtain Unlawful	eation of all references are employers, and personal Detainer, Credit Reports rstands that incomplete ocessing which may resu	nd facts, references, Telech or incorrult in den	includ es. Ap ecks, a ect info ial of to	ing but no oplicant he and / or cri ormation p enancy. A	ereby authorizes owner / minal background provided in the application pplicant hereby waives

Date:_

(Signature required)

Applicant: __