

RENTAL APPLICATION

No Cash Accepted

FOR OFFICE USE ONLY

Type of apartment desired: ST _____ 1BR _____ 2BR _____ 2BR/2BA _____ Date Desired _____ Traffic source _____ Today's Date _____ Time: _____ AM / PM	Apt. Address _____ Sec. Dep. \$ _____ Amt. Rec'd \$ _____ Date _____ Base Rent \$ _____ Additions \$ _____ Move-In Date _____ Lease Dates _____ Date Approved / Refused / Cancelled _____
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GENERAL INFORMATION

Applicant's full name		Date of Birth	Social Security #	
Marital Status:	<input type="checkbox"/> Single	<input type="checkbox"/> Married	<input type="checkbox"/> Widowed	<input type="checkbox"/> Separated / Divorced
Phone#	Cell Phone#		Email	
Co-applicant Name		Date of Birth	Social Security #	
Phone#	Cell Phone#		Email	
Other Occupants-Name		Date of Birth	Relationship	
Name		Date of Birth	Relationship	
Name		Date of Birth	Relationship	
*Pet type	Breed / Age		Weight	How many?

*Size and breed restrictions apply. See Pet Addendum.

RESIDENTIAL HISTORY (Please use separate sheet of paper if necessary)

Present - Street address				
City		State	Zip	
Apartment Name/Mortgage Co.		Street Address		
City, State, Zip		Phone #	Move-In Date	Move-Out Date
Monthly Payment \$	Reason for Moving			
Previous - Street address				
City		State	Zip	
Apartment Name/Mortgage Co.		Street Address		
City, State, Zip		Phone #	Move-In Date	Move-Out Date
Monthly Payment \$	Reason for Moving			

Have you ever been threatened with an eviction or been evicted from any leased premises? (Y / N) If yes, please explain.

Have you ever received a notice to leave the rental property or a 3-day notice to leave? (Y / N) If yes, please explain.

Have you ever been convicted of a crime other than a minor traffic offense: (Y / N) If yes, please explain:

EMERGENCY CONTACTS

In case of emergency, contact:		Relationship
Address:	City/State:	ZIP:
Phone#	Cell Phone#	Email
Second emergency contact:		Relationship
Address:	City/State:	ZIP:
Phone#	Cell Phone#	Email

EMPLOYMENT HISTORY

Present Employer			Position
Business Address			Phone #
Supervisor	Employed from	To	Approx Net Monthly Income \$
Previous Employer			Position
Business Address			Phone #
Supervisor	Employed from	To	Approx Net Monthly Income \$

OTHER INCOME-(Secondary Employment, Food Stamps, Disability, Social Security, Child Support, Alimony)

Source:	Net Monthly Amount:
Source:	Net Monthly Amount:
Source:	Net Monthly Amount:

VEHICLE INFORMATION

Total Number of Vehicles to be parked at residency:			
1 - Year	Color	Make/Model	License Tag #
Registered to:			
2 - Year	Color	Make/Model	License Tag #
Registered to:			

APPLICANT AUTHORIZATION

1. The management relies on the information given above to be complete and accurate in order to act on your application in a timely manner. Any false statements, misrepresentations, inaccurate information or failure to supply the data requested above may serve as a rejection of your application or grounds for an eviction action if later discovered to be false, misrepresented, inaccurate or incomplete information.
2. By signing the application, you are authorizing the use of any credit reporting/screening agencies to verify credit, validate accuracy of all information recorded above. Further, your signature authorizes Management and the credit reporting/screening agencies to later exchange credit information and access your credit report in the event of default of the lease agreement for collection or skip tracing purposes.
3. I hereby deposit with owner/agent the sum of \$ _____ as a security deposit and \$ _____ as a non-refundable application fee, on the premises listed above. **Payments must be made by Money Order or Check. No Cash Accepted.** I understand that the security deposit will be retained by Management if this application is approved and I am unable to fulfill the conditions of occupancy. I acknowledge that the Landlord will suffer damages as a result of the processing of this application and holding the specified unit off the market. The deposit will be returned if this application is not approved, providing that all the above questions is answered correctly and truthfully.
4. I warrant that all of the representations in this application are true and correct. I also understand that information provided on this application shall survive approval of this application, and execution of a lease agreement.
5. I understand that occupancy of the apartment is limited to persons identified on this agreement. I remain responsible for all occupants, guests and invitees to my apartment.
6. I agree to submit to Lessor valid photo identification (such as a state driver's license).

In compliance with the Fair Credit Reporting Act, I understand that a consumer credit report will be made which may include information as to my character, general reputation, personal characteristics and mode of living. The nature and scope of the investigation requested may include information obtained through personal interviews concerning residence verification, marital status, number of dependants, employment, occupation, habits, reputation and mode of living.

The term "Lessor" shall include the Owner-Landlord and Central Management Company as managing agent and any affiliate, agent or employee thereof.

Signature Applicant

Signature Authorized Agent

Date
REV. 08/23/11

Date

