

Back Rental Application

Instructions: A separate application must be filled out by each applicant. Completely fill out each blank and sign where indicated.

PERSONAL

APPLICANT _____

MARITAL STATUS: Single Married Divorced

BIRTH DATE: _____ SS# _____ DRIVERS LICENSE State Issued by _____ # _____

ADDRESSES

Present Address _____ City/State/Zip _____ Since _____ Rent/Month _____ Phone _____

How long? _____

Present Landlord _____ Address _____ City/State/Zip _____ Phone _____

Is present rent up to date? Yes No Have you given notice? Yes No

Previous Address _____ City/State/Zip _____ Since _____ Rent/Month _____ Present Phone (____) _____

Previous Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____

How long did you rent from your previous landlord? _____

OCCUPANTS

Number to occupy _____

NAME	RELATIONSHIP	BIRTHDATE & SS #

PETS: Yes No If yes, give details (number, type & size)

CARS

Make/Model/color #1 _____ State _____ License Plate #1 _____ Lien Holder #1 _____

Make/Model/color #2 _____ State _____ License Plate #2 _____ Lien Holder #2 _____

EMPLOYMENT

EMPLOYER _____ Since _____ PREVIOUS EMPLOYER _____ Since _____

Street/City _____ Street/City _____

What do you do? _____ What did you do? _____

INCOME

Current Income \$ _____ Weekly/Biweekly/Monthly
Source _____

Current Income \$ _____ Weekly/Biweekly/Monthly
Source _____

Bank/Credit Union _____ Act.# _____ Bank/Credit Union _____
Act.# _____

Have you ever filed bankruptcy ? yes _____ no _____

Have you ever committed and been charged with a felony - (yes) (no) If yes what and when _____

Do you smoke ? yes _____ no _____

REFERENCE

Relative _____ Relation _____
Reference _____ Phone (____) _____

Address _____ Phone (____) _____
Address _____

Non-Relative
Reference _____ Phone(____) _____
Contact _____ Phone(____) _____

Non-Relative
Reference _____ Phone (____) _____
Contact _____ Phone (____) _____

Applicant authorizes the owner to contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to investigate applicant.

All the information is true, accurate and complete to the best of applicant's knowledge. Owner reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME

THE DEPOSIT HOLDING FEE IS NON-REFUNDABLE AND WILL BE APPLIED TO PROPERTY DEPOSIT

X _____
APPLICANT

DATE

DO NOT WRITE BELOW THIS LINE THIS SECTION TO BE COMPLETED BY INTERVIEWER	
Credit Report: (Favorable/Unfavorable) By: _____	
Other Comments: _____ _____	
Deposit: _____	Option _____ Monthly Rent _____
Unit Applied For: _____	
Terms of Lease _____	Months _____
Move-in Date _____	Lease Expires _____ Num. Keys _____
Total Number of Occupants _____	
Separate Pet Deposit _____	
Utilities to be paid by tenants	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Water <input type="checkbox"/>