

# 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

<b>DO NOT WRITE BELOW THIS LINE THIS SECTION TO BE COMPLETED BY INTERVIEWER</b>	
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"/>