

2017 RESIDENTIAL RENTAL APPLICATION

To be completed separately by **every** adult tenant. Please block print clearly.

Property Address _____ Desired Lease Start _____
Unit Number (if applicable) _____ Desired Lease End _____

Personal Information

Full Name _____
Social Security (Needed to process) _____ E-mail _____
Home Phone _____ Work Phone _____ Cell Phone _____
Date of Birth (MM/DD/YYYY) _____ Driver's License # _____ State _____
Vehicle Make _____ Model _____ Year _____ License Plate # _____ State _____
If a student: Year in School _____ Degree Sought _____
Anticipated month and year of graduation _____

Rental/Housing Information

Current Street Address _____
City _____ State _____ Zip _____ Years at this address _____
Reason for Leaving _____
Owner/Manager _____ P hone _____

Previous Street Address _____
City _____ State _____ Zip _____ Years at this address _____
Reason for Leaving _____
Owner/Manager _____ P hone _____

Number And Types Of Pets _____
Do you smoke? (Circle one:) No / Outdoors only / I would like to smoke indoors
Water-filled Furniture You Own _____

Name and Relationship of Every Adult To Live With You

Name and Relationship of Every Child To Live With You

Have you ever been arrested? _____ Filed for bankruptcy? _____ Been sued? _____
Been evicted? _____ Are you a prior sex offender who is required to register an address with police? _____
If you responded "yes" to any of the above, please explain:

(Continued on reverse)

Employment History and Income

Current Occupation _____ Monthly income (before deductions) _____

Name of Current or Most Recent Employer _____

Address of Employer _____ Phone _____

Years With This Employer _____ Name of Supervisor _____ Phone _____

Are you still working at this job? _____

If a student, will you continue the same job at the same rate of pay while you're in school? _____

If you answered "no" to either of the two questions just above, please describe anticipated employment/other sources of support during the tenancy:

Personal References (Note: Relatives are not valid references)

Name _____ Relationship to you _____ P hone _____

Name _____ Relationship to you _____ P hone _____

I certify that all of the information above is true and correct, and hereby authorize the Owner or Manager of the property to verify any and all of the information above, check credit information, and/or contact references. I further authorize the Owner or Manager to share and/or discuss the information above, and the information obtained from credit investigations and/or communications with references, with the persons listed under the heading "Name and Relationship of Every Adult To Live With You" above. I understand that provision of false or misleading information on a rental application are grounds for termination of leases and retention of deposits.

Date _____ Signature _____

Please return to Brett Glass, Manager (Hand-deliver or call for FAX #)