RENTAL APPLICATION Equal Housing Opportunity

The undersigned hereby makes an application to rent the following property: Anticipated move-in date of _____ at a monthly rent of \$_____ + monthly utility fee of \$_____ , and security deposit of \$_____ + pet deposit of \$_____ (if applicable). PLEASE TELL US ABOUT YOURSELF Full Name Home Phone: _____ Date of Birth Social Security # Email Address: Other Phone: Emergency Contact #1 Emergency Contact #2 _____ Emergency Contact #3 Co-Applicant Name____ Co-Applicant Home Phone: _____ Date of Birth_____ Social Security # Email Address: Co-Applicant Other Phone: Emergency Contact #1 Emergency Contact #2 _____ Emergency Contact #3 List All Pets Do you or does anyone living with you smoke? Yes_____ No ____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS) Current Address Apt# City _____ State ____ Zip____ Month/Year Moved In_____ Month/Year Moved Out Reasons for Leaving Rent \$ Owner/Agent Phone: () ______ Previous Address 1 Apt# City _____ State ___ Zip____ Month/Year Moved In_____ Month/Year Moved Out_____ Reasons for Leaving_____ Rent \$_____ Owner/Agent _____ Phone: () ______ Previous Address 2_____Apt#____ City _____ State ____ Zip____ Month/Year Moved In Month/Year Moved Out Reasons for Leaving Rent \$____Owner/Agent ____ Phone: () _____

PLEASE DESCR	IBE YOUR CR	EDIT HISTOR	Y		
Have you declared	bankruptcy in th	ne past seven (7)	years?	Yes	_ No
Have you ever bee	n evicted from a	rental residence	?	Yes	No
Have you had two	or more late rent	tal payments in t	he past year?		
Have you ever will We will be running items on these or f Remember, we und	g a credit check a rom the question	and a criminal bass above, please	ackground check take this chance	t. If there w	ill be any negative the situation.
PLEASE PROVI	DE YOUR EMI	PLOYMENT II	NFORMATION	1	
Your Status:	_Full Time	Part Time	Student	_Unemploy	red
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Dates employed					
Employed as					
Supervisor Name					
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(If employed by ab					
If you have other s and person (banke reveal alimony, ch application.	r, employer, etc.)	who we may co	ontact for confirm	nation. You	
Amount \$		Per			
Source/Contact Na	ıme				
Co- Applicants E					
Your Status:	Full Time	Part Time	Student	Unemplos	red

Dates emr	oloved							
Superviso	r Name							
Phone: ()			Sala	ary \$		per	
(If employ	yed by ab	ove less th	an 12 montl	hs, give na	ıme & pl	none of prev	rious emplo	yer or school:
and person	n (banker nony, chi	, employer	, etc.) who	we may co	ontact for	r confirmati	on. You do	ncome, source not have to asider it in this
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				lence so w	e can be	sure these i	ssues do no	t reoccur.
	st issues	with your f			e can be			t reoccur.
List all pa	st issues	with your f	ormer resid	you	to	discuss	this	application
Where Day Phon I hereby a conditions day of each	may e # (apply to less set forther month, nat all sta	we we ease the above in this apove, in advance as the attements measurements meas	reach reach ove-describ plication, and the leasing against and this	you ped premised I acknowleducement acknowledgent ("Age application application application acknowledgent application application acknowledgent	to Night Ph ses (the 'owledge to the ovent'), to on are to	discuss one # ('Premises") and agree the saccept this arue and corrections.	this for the termat rent is property ("application, rect; however")	application and upon the ayable the fire Owner") and I represent are ver, should ar
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approved and accepted, within three (3) business days, I agree to execute a lease for the Premises for a term of months before possession is given, using Owner's standard lease form. I agree to pay the balance of the security deposit at the time I execute the lease. To the maximum extent permitted by law, if my application is not approved or accepted by Owner, I agree that the refund of the Application Fee will be my sole remedy, and I hereby waive any claim for damages by reason of non-acceptance of my application. If I withdraw my application for any reason, I agree that the Application Fee will be retained by Agent to offset Agent's cost, time, and effort in processing my application. Additionally, if I fail to execute a lease for the Premises using Owner's standard lease form, within three (3) business days after acceptance of this application, I agree that the Application Fee will be retained by Agent to offset Agent's cost, time, and effort in processing my application.
I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared, whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.
The above information, to the best of my knowledge, is true and correct.
Please sign: X

AUTHORIZATION Release of Information

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

Name (please print)		
X		
Signature		Date
APPLICANT: PLEAS	SE DO NOT WRITE BELOV	W (FOR OFFICE USE ONLY)
Deposit of \$	Received by	
Date		