

Applicant Information



Applicant's First Name M.I. Last		Birth Date	Social Security Number		Driver's License # & State
Applicant #2 First Name M.I. Last		Birth Date	Social Security Number		Driver's License # & State
<input type="checkbox"/> Single <input type="checkbox"/> Unmarried <input type="checkbox"/> Married	Expected Move-In Date	Apartment to be Occupied by: Adults ____ Children ____		Children's Names & Ages	
Applicant: Email: _____				Applicant's Phone Number: _____	
Applicant #2: Email: _____				Applicant's Phone Number: _____	
Do you have pet(s)? <input type="checkbox"/> Yes <input type="checkbox"/> No	How Many?	Type & Size	A Pet deposit & Owner's consent is required. Restrictions are placed on the type/breed of dog, and cats must be front declawed and spayed/neutered.		
Current Address City State Zip			How Long?	<input type="checkbox"/> Own <input type="checkbox"/> Rent	
Name & Address of Current Landlord or Mortgage Company			Landlord Phone Number:	Monthly Payment	
Previous Residence Address		Previous Landlord/Apartment Community	Landlord Phone Number:	How Long?	
Applicant Employed By		Supervisor's Name		How Long?	
Applicant Employed By City State Zip		Phone Number	Position Held/Occupation	Salary per \$	
Applicant #2 Employed By		Supervisor's Name		How Long?	
Address City State Zip		Phone Number	Position Held/Occupation	Salary per \$	
ADDITIONAL INCOME: Additional income such as child support, alimony or separate maintenance need not be disclosed unless such additional income is to be included for qualification hereunder. Amount of \$_____ per _____ Source: _____					
Have you ever been convicted of a crime? <input type="checkbox"/> Yes <input type="checkbox"/> No			Applicant's Name: _____		
If yes please explain: _____					
# of Vehicles on Property		Do you have any recreational vehicles, vans, boats, motorcycles? If so, specify: _____			
Auto #1 - Make, model & color		Year	License Number	State	
Auto #2 - Make, model & color		Year	License Number	State	
Name of Parent of Closest Relative		Address City State Zip	Phone		
Personal Reference (No relatives please)		Address City State Zip	Phone		

Were you referred to our apartment community? Yes No If yes, who referred you? _____

How did you hear of us? _____

I, the Undersigned, certify that the information given herein is for the confidential use of the Management and is declared to be factual and true. (Management reserves the right to reject any applicant because of misrepresentation.) If this application is accepted, I will abide by all the Rules and Regulations of the Management. I further acknowledge that this deposit will be forfeited in full, as liquidated damages, if I do not accept occupancy on approval of this application. Acceptance of deposit does not imply approval of Applicant and deposit will be refunded in event of rejection.

I hereby authorize the Management to investigate my credit and financial responsibility, income, rental and eviction history, and the statements made in this application, and to obtain a consumer credit report on me from a consumer reporting agency that compiles and maintains files on consumers on a nationwide basis. My performance under and lease of rental agreement that I may enter into with the Management may be reported to such reporting agency.

Applicant _____ Date _____

Applicant _____ Date _____

Date _____ CREDIT CHECK CHARGE Applicant has submitted the sum of \$ _____ which is a nonrefundable payment for a credit check. Received of Applicant(S) _____ the sum of \$ _____ deposited with application for apartment pending investigation. No tenancy is hereby created. Applicant will be notified upon completion of investigation. Acceptance of deposit does not imply approval of Lessee and deposit will be refunded in event of rejection of Applicant(S). Deposit will be retained in event of acceptance, regardless, of occupancy. _____ Management's Agent