

Date: _____

One Application Per Person

Current Phone _____

NOTICE TO APPLICANTS

We Do Not allow known Drug Dealers and Individuals Participating in Criminal Activities to Rent any of our units. If you are approved for a rental unit, and we as the Landlord/property manager/owner, later discover that you are a narcotic's user or dealer, we will immediately report you to the appropriate authorities. We will also willingly participate in testifying against you and submit any information you give us on your application as evidence. Please be aware that Law Abiding Tenants occupy our Units and are aware of the types of activity that signal the presence of drug dealers and have been instructed to contact us immediately upon discovery of any and all illegal activity.

Full Name (Including Middle, Sr., Jr., II, III, etc.) _____

Maiden Name (If Applicable) _____ Social Security No. _____

Date of Birth _____ Driver's License No. (Including State) _____

Current Address _____ City/State/Zip _____

Date Moved In _____ Rent Amount _____ Week or Month (Circle One)

Current Landlord's Name _____ Phone No (____) _____

Landlord's Address _____ City/State/Zip _____

Reason for Moving _____

Previous Address _____ City/State/Zip _____

From _____ To _____ Reason for Moving _____

Landlord Name _____ Phone No (____) _____

Landlord's Address _____ City/State/Zip _____

Previous Address _____ City/State/Zip _____

From _____ To _____ Reason for Moving _____

Landlord Name _____ Phone No (____) _____

Landlord's Address _____ City/State/Zip _____

References (Not A Relative & Not Listed Above.)

Name _____ Relationship _____ Phone No. (____) _____

Name _____ Relationship _____ Phone No. (____) _____

In Case of Emergency, Please Notify the Following Person:

Name _____ Relationship _____ Phone No. (____) _____

Address _____ City/State/Zip _____

Others to Occupy the Apartment Including All Children

NAME	SOCIAL SECURITY NO	DATE OF BIRTH	RELATIONSHIP

Employment

Present Employer _____ Supervisor's Name _____

Address _____ City/State/Zip _____

Phone No. (____) _____ Employed Since (Date) _____ Salary \$ _____ Week or Month

Previous Employer _____ Supervisor's Name _____
Address _____ City/State/Zip _____
Phone No. (____) _____ Employed From (Date) _____ Salary \$ _____ Week or Month

Other Income

Source of Income _____ Amount \$ _____ Week or Month (Circle One)
Source of Income _____ Amount \$ _____ Week or Month (Circle One)
Source of Income _____ Amount \$ _____ Week or Month (Circle One)

Bills Owed (Child Support, Car Payment, Charge Cards, etc.)

Debt Type _____ Amount Owed \$ _____ Payments \$ _____ Week or Month
Debt Type _____ Amount Owed \$ _____ Payments \$ _____ Week or Month
Debt Type _____ Amount Owed \$ _____ Payments \$ _____ Week or Month

Vehicles

Automobile Make/Model	Year	Color	License Plate Number	State

What types of pets do you own? _____ Have you ever been brought to Court by a Landlord? Yes No
Had a Summary Ejectment Brought against you? Yes No Has a Landlord ever asked you to move? Yes No
Have you ever paid your rent late? Yes No Have you ever willfully or intentionally not paid rent? Yes No
Have you ever broken your lease agreement? Yes No Have you ever filed Bankruptcy? Yes No
Have you ever had a Judgement filed against you? Yes No Have you ever been convicted of a felony? Yes No
Are you currently being supervised on probation or parole? Yes No If yes, state the crime convicted of: _____

The following authorizes that: Credit reports may be obtained from any consumer reporting agency, verification of my rental history may be obtained from landlords, property management companies, or any other service or sources which could attest to my creditability, suitability and worthiness to rent housing accommodations. The following also warrants and represents that all statements contained herein are true and correct to their knowledge and belief. If any statement or writing contained herein is not true, or applicant chooses to withdraw this application for any reason, the deposit will be applied to rent or actual damages sustained by the owner, except that the deposit will be fully refunded if this application is not accepted by the owner for reasons other than listed above. In addition, if you are approved for a rental unit, you authorize the landlord/property manager/owner can report your name to the appropriate Consumer Credit Reporting Agency as the occupant of this dwelling unit. This application may also be released to any company, agency or service upon their request.

Photo Identification is Required & Mandatory at time of Application.

Legal Signature: _____ **Date of Signature:** _____

Do Not Write Below This Line

For Use By Landlord/Property Manager/ Owner

Name _____
Address _____
City/State/Zip _____
DOB _____ Height _____ Weight _____
Hair Color _____ License No _____
State _____ Expiration _____

- Verification
- Driver's License or State ID
 - Current Landlord Acceptable Not Acceptable
 - Previous Landlord Acceptable Not Acceptable
 - Employment Acceptable Not Acceptable
 - Prior Employment Acceptable Not Acceptable
 - Application Fees Received: _____
 - Date Received: _____