## RENTAL APPLICATION

## APPLICANT/S Applicants Last Name: \_\_\_\_\_\_ First: \_\_\_\_\_\_ MI \_\_\_\_ Birth date: \_\_\_\_\_\_ Drivers License Number: Social Security Number: Phone Number: Email Address: First: MI Birth date: Co Applicant Last Name: Drivers License Number: \_\_\_\_\_\_ Social Security Number: \_\_\_\_\_ Email Address: \_\_\_\_\_Phone Number: \_\_\_\_\_ Expected Move In Date: \_\_\_\_\_ Do you have any pets? If so, how many? Description of Pets: Size of pet: \_\_\_\_lbs RESIDENCE Present Address / City / State: How long? \_\_\_\_\_ Area-Code Phone: \_\_\_\_\_ Own/Rent/Other:\_\_\_\_ Name and Address of Current Landlord or Mortgage Company: Area-Code Phone: \_\_\_\_\_\_ Monthly Rent/Payment: \_\_\_\_\_ Previous Address / City / State: Previous Landlord Address: Area-Code Phone: \_\_\_\_\_ How Long: \_\_\_\_\_ Have you ever been evicted: \_\_\_\_\_ **EMPLOYMENT** Applicant's Employer: \_\_\_\_\_ How Long? \_\_\_\_\_ Address: Area-Code Phone Number: \_\_\_\_\_\_ Position: \_\_\_\_\_\_ Salary: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Previous Employer: Address: Area-Code Phone Number: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_ Co Applicant's Employer: Supervisor's Name: How Long? Address: Area-Code Phone Number: Position: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Previous Employer: Address: Area-Code Phone Number: \_\_\_\_\_\_ Position: \_\_\_\_\_\_ Salary: \_\_\_\_\_

Additional Income: Child support, alir	nony, etc		
Source:	Amount:	per	:
VEHICLES			
	Da harra ann matar harras	h	IC
Number of Venicles on Property:	Do you have any motor homes, vans	, boats, or motorcycles?	If so, specify:
Auto Number 1 Year/Make/Model		License Plate	State:
OCCUPANTS			
Total Number of Occupants:	_		
List Occupants with Birthdates:			
EMERGENCY CONTACT			
In Case of Emergency Call:		Relationship:	
Area-Code Phone:	Address:		
liquidated damages incurred by the owner as a r LEASE INFORMATION	cancelled within 3 days (72 hours) but the undersesult of not having been able to rent the apartmen	t to another party during this tin	ne.
		Size of Apartment:  Move In Date:	
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Pro Rate:	Security Depo	SIL.	
Balance due upon execution of lease b	y certified check or money order: \$	Dat	e:
I/We authorize the landlord to verify r	ny credit record, employment, residence	es and other income refere	ences. I/We certify that I have
paid my mortgage/rent payment, have	not broken a lease, and have not filed for	or bankruptcy within the	past five (5) years. I/We
understand that the discovery of false	information or negative credit or financ	ial information will result	t in denial.
A non-refundable charge of _\$	will be retained for credit check	purposes,	
I/We authorize Lessor and/or SafeRen	t to verify the accuracy of all statement	s in this application. I/W	e authorize all employers,
landlords and creditors to release all ir	formation concerning the applicant for	purposes of verifying thi	s applicant's ability to afford
the contractual obligations of this lease	e.		
Applicant Signature:		Date:	
		Date:	
Resident Representative Signature:		Date:	