RENTAL APPLICATION

PROPERTY ADDRESS APPLIED FOR:

_____

APPLICANT (please write legibly) **(NON-REFUNDABLE) $75 APPLICATION FEE PAID $_____**

FULL NAME	BIRTH DATE	SOCIAL SECURITY #
EMAIL	DRIVERS LICENSE #	PHONE#
VEHICLE YEAR/MODEL/COLOR	LICENSE PLATE #	CELL #

TWO YEARS RENTAL HISTORY REQUIRED - (USE BACK OF APPLICATION IF MORE SPACE NEEDED)

CURRENT		PREVIOUS	
ADDRESS		ADDRESS	
CITY/STATE/ZIP		CITY/STATE/ZIP	
MOVE-IN DATE	MOVE-OUT DATE	MOVE-IN DATE	MOVE-OUT DATE
MONTHLY RENT		MONTHLY RENT	
OWNER/LANDLORD NAME		OWNER/LANDLORD NAME	
OWNER PHONE #		OWNER PHONE #	
REASON FOR MOVING		REASON FOR MOVING	

TWO YEARS EMPLOYMENT HISTORY REQUIRED - (USE BACK OF APPLICATION IF MORE SPACE NEEDED)

CURRENT		PREVIOUS	
EMPLOYERS NAME		EMPLOYERS NAME	
ADDRESS		ADDRESS	
WORK #		WORK #	
CONTACT PERSON		CONTACT PERSON	
YOUR POSITION		YOUR POSITION	
WORK START DATE	WORK END DATE	WORK START DATE	WORK END DATE
MONTHLY SALARY		MONTHLY SALARY	
REASON FOR LEAVING		REASON FOR LEAVING	

LIST ALL OTHER OCCUPANTS (AGE AND RELATIONSHIP)? _____

DO YOU HAVE PETS? _____ IF YES DESCRIBE SIZE? _____ DO YOU PLAN TO USE ANY WATER-FILLED FURNITURE? _____

HAVE YOU EVER BEEN CONVICTED IN THE SALE OR MANUFACTURING OF ILLEGAL DRUGS? _____ IF YES EXPLAIN? _____

HAS ANY OCCUPANT BEEN CONVICTED OF A GROSS MISDEMEANOR OR FELONY? _____ IF YES EXPLAIN? _____

HAVE YOU EVER BEEN EVICTED? _____ HAVE ANY OF THE OCCUPANTS EVER REFUSED TO PAY RENT WHEN DUE? _____ IF YES EXPLAIN? _____

HAVE YOU EVER FILED BANKRUPTCY? _____ IF YES WHEN? _____ CHECKING ACCOUNT # _____ BANK? _____

CLOSEST RELATIVE NAME, ADDRESS, PH#? _____

ARE YOU A MEMBER OF THE ARMED FORCES? _____ ACTIVE / RESERVE HOW DID YOU LEARN ABOUT THIS PROPERTY? _____ DESIRED MOVE-IN DATE? _____

I, (UNDERSIGNED) HEREBY GIVE PERMISSION TO HAVE ANY INFORMATION VERIFIED INCLUDING CREDIT, EMPLOYMENT, INCOME, BANK ACCOUNT, RENTAL HISTORY AND CRIMINAL BACKGROUND INFORMATION. I FURTHER AGREE THAT A PHOTOCOPY OF THIS AUTHORIZATION MAY BE ACCEPTED. **PROOF OF IDENTIFICATION IS REQUIRED: IDENTIFICATION USED?** _____ (IE. PASSPORT, SOCIAL SECURITY CARD, DRIVERS LICENSE, BIRTH CERTIFICATE, ETC.)

FIRST PAYMENT MUST BE BY MONEY ORDER OR CASHIERS CHECK. CASH IS NEVER ACCEPTED. (EL PRIMER PAGO TIENE QUE SER UN ORDEN DE PAGO O CHEQUE DEL BANCO).

_____

APPLICANT SIGNATURE **DATE**

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