RENTAL APPLICATION

(FILL IN ALL SPACES) 1. Name

Name		Mar	riedS	Single	
Date of Birth	Present Phone No. ()		Soc. Sec. No.	5.0	
	nts. (Separate application required				
	Relationship Ag			Soc. Sec. No.	
b.					
c					
. Will a pet or assistive animal of	f any type live in your apartment?	Yes □ No □ If	ves, please desc	ribe:	
	nt (Full Grown) Spay				
Residence Information:	1 2				
Current Residence:					
Address		Apt. No.	City/State	e	
Zip Code					
	os. Name of Landlord		Landlord	Phone ()	
If less than two years at your pr	resent address, list previous address	sses below:		\	
Former Residence:	, •				
Address:		Apt No	City/State	e	
Zin Code					
How Long Years Me	os. Name of Landlord resent address, list previous addres		Landlord	Phone ()	
If less than two years at your pr	esent address, list previous address	ses below:			
Former Residence:					
Address:		Apt No	City/Stat	te	
Zip Code					
How LongYearsMo	os. Name of Landlord		Landlord	Phone () _	
. Employed by	os. Name of Landlord APositionPhone Number (ddress			
Phone ()	Position		How Long	Years	Mos.
Supervisor's Name	Phone Number ()	Your Mor	nthly Income	
other bource of medine for itel	intai i ayinciit				
If less than two years at you pre	esent employer, list previous employer	oyers below:			
Former Employer	Position	ddress			
Phone ()	Position		How Long	Years	Mos.
Supervisor's Name	Phone Number ()	Your Moi	nthly Income	
Former Employer	A	ddress			
Phone ()	Position		How Long	Years	Mos.
Supervisor's Name	Phone Number (_)	Your Mon	nthly Income	
. Spouse of Other Occupant s iva		Date of Birth	So	c. Sec. No	
(Maiden Name If Married Less	Than Two Years)				
Employed by	A	ddress			
Phone ()	Position		How Long	Years	Mos.
Supervisor's Name	Phone Number ()	Your Mon	nthly Income	
Former Employer	Ad Position	dress			
Phone ()	Position		How Long	Years	Mos.
Supervisor's Name	Phone Number (_)	Your Mo	onthly Income _	
. Your Bank (s): Name	Acct. No. Savin	ngs/Checking]	Branch	Address
Crodit Defense (D-::1- C 1	Condit Condo Characa Assault				
` `	, Credit Cards, Charge Accounts)		and A a a c +	F D	-4-
Type	Bank/Store Company	C	ard Account	Exp. D	ate
Bank Card					
Other					
Other				D.4	
y. Your Driver's License No		State	E	xp. Date	

Spouse's Driver's License No.		State		Exp. Da	ate
Vehicles You Would Like to Park on Property:				1	
Make/Model Year	Colo	or	License Plate N	lo.	State
Auto					
Auto Motorcycle					
Description of any other vehicle (boat, trailer, truck,		1) 1.1 1:1-a	4- 1	
				to keep on	property.
Prior written permission separate from this applicati				D1	a
Other Vehicle: Make/Model Y	'ear	Color _	License	Plate No	State
10. Have you or your spouse/roommate ever been evict	ed? Yes □	No □	Declared Bank	ruptcy? Ye	s □ No □
Do you use illegal drugs? Yes □ No □ Do you en	ngage in the	distribution	or sale of illegal	drugs? Yes	s □ No □
Have you ever been convicted of a felony or any cr	ime related	to harm caus	ed to a person or	property, i	including but
not limited to arson, assault, intimidation, sex crime					
obscenity and related violations? Yes □ No □	,	,	,	, r	- ,
If yes, please explain the reason					
11. Do you have any outstanding warrants for you arres		Ja 🗆			
12. Do you have a waterbed? Yes □ No □ Do you have					
13. Person (s) to notify and person you authorize to tak	e possession	n of your pers			
For Applicant				o-Applican	
Name		Name _			
Address		Address	6		
City/State		City/Sta	ite		
City/State Home		Work P	hone	Но	ome
Note: Management is not responsible for damage to residents	property un	less caused by	negligence on the	part of man	agement or an employee of
management. Residents are strong advised to obtain renters in	nsurance to co	over loss or da	mage to their prop	erty!	1 7
In consideration of management holding the apartment for me, I agre holding deposit is refundable if my Application is not approved (14 deposited to the required move-in costs. I may cancel this agreement a you of my decision to cancel by 5 p.m. on	e to pay a hold lay delay requir nd be refunded . Cancellation	ling deposit of \$ red for bank clea I my holding der n after this time	arance of check). If no posit (14 day delay rewill result in forfeitu	ny Application equired for bar are of my hold	n is approved, the holding deposit is nk clearance of check) by notifying ling deposit. I must pay rent on or
DENITAL	ACDEEN	AENIT INIE			
KENIAL	AGREEN	Acres	ORMATION	Daw	at Start/End Data
Apt #TypeFurnUnfurn MONTHLY RENTAL CHARGED	Partial_	Agree	ment Lengtn	Owner Ker	nt Start/End Date
Pont	Villi	Defundable D	reporation Charge	Owner	
Rent Pet Rent	Non	-Refundable P	et Sonitizing Cher		
Othor					
Total Monthly Rent	Sect	rity Denosit			
Rental Concessions at Move-In	Beed	inty Deposit_			
First Month Rent					
Sales Tax					
City Sales Tax	Less	Holding Den	osit		
(Subject to change during lease term)	LCSS	Troiding Dep	J31t		
TOTAL MONTHLY CHARGES	TOT	TAL DUE AT	MOVE-IN		
TOTAL MONTHLY CHARGES	101	THE BOETH			
Applicant represents that all of the above statements are true and con acknowledges that false information contained herein constitutes gro management may not be able to complete a comprehensive evaluatio after move-in and may convert the proposed Rental Agreement to a ragrees to the terms of the "Deposit To Hold Agreement". This applic deliver possession of the proposed premises.	unds for rejection of this Agree month-to-month	ion of this applic ement before mo h term due to fal	ration if discovered by ve in. Management r se or misleading info	efore move-in eserves the rigormation conta	n. Applicant acknowledges that ght to verify application information ained in this application. Applicant
Applicant's Signature		Managem	ent's Receipt		Date
Co-Applicant's Signature	Date				