

Application to Rent

Private Pay
 Housing Authority
 Co-Signer



Each applicant must complete a separate application. If the information provided on this form is not correct and legible your application may be delayed or rejected. There is a non-refundable \$25.00 application fee. If you are rejected for credit reasons your deposit will be returned. If you do not have credit, a family member with good credit can act as a co-signer and be responsible for the rent. Please provide a copy of your ID and Paycheck with your application for quicker processing. If you leave a deposit to hold a rental unit and do not take the unit, you will forfeit the deposit. The unit along with paint, carpet and appliances are in "AS-IS" condition unless otherwise stated in writing. Any monies owed on previous accounts will apply to that account first. Rent begins on the day you receive the keys and does not end prior to the keys being returned. (Electric, heat and plumbing malfunctions will be repaired by the owner.)

I hereby consent to allow the owner of the property, through his designated agent and its employees, to obtain and verify my consumer information (including credit, criminal and public records information) for the purpose of determining whether or not to lease to me an apartment. I understand that should I lease an apartment, the owner and his agents shall have a continuing right to review my consumer information, rental application, payment history and occupancy history for account review purposes and for improving application methods. If you do not tell the truth to the best of your knowledge you can lose your deposit.

_____ Date

_____ Signature of Applicant

PROPERTY ADDRESS APPLYING FOR:	DATE:
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Applicant Information

Everyone must complete this section.

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NUMBER	DATE OF BIRTH
DRIVER'S LICENSE NUMBER	STATE	HOME PHONE NUMBER	<input type="checkbox"/> U <input type="checkbox"/> L	CELL PHONE NUMBER
Criminal Record?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Bankruptcy?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Do you smoke? <input type="checkbox"/> YES <input type="checkbox"/> NO
Is your credit?	<input type="checkbox"/> Excellent <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> None			

Current Address Information

Everyone must complete this section.

PRESENT HOME ADDRESS	CITY	STATE	ZIP CODE	LENGTH OF TIME	RENT
REASON FOR MOVING	LANDLORD NAME		LANDLORD PHONE NUMBER <input type="checkbox"/>		

Previous Address Information

Everyone must complete this section.

PREVIOUS HOME ADDRESS	CITY	STATE	ZIP CODE	LENGTH OF TIME	RENT
REASON FOR MOVING	LANDLORD NAME		LANDLORD PHONE NUMBER <input type="checkbox"/>		

Pet Information

Everyone must complete this section.

Will you have any pets?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, describe
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Pet policy: If you allow any animal in your home without the landlord's prior written approval the penalty will be \$15.00 per day and the penalty will be back dated to the date of the lease.

Employer Information - Source of Income

EMPLOYER NAME			EMPLOYER ADDRESS		
LENGTH OF TIME		NAME OF SUPERVISOR		SUPERVISOR PHONE NUMBER	
CURRENT GROSS INCOME	PER WEEK	PER MONTH	OR YEAR		

List of Financial Obligations and Credit References

Everyone must complete this section.

Name of Creditor	Address	Phone Number	Monthly Payment Amount

Applicants must complete this section; Co-Signers do not need to complete this section.

Print the Name of each person that will live in this rental unit?	Age	Criminal Record
1.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge
2.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge
3.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge
4.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge
5.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge
6.		<input type="checkbox"/> Misdemeanor Charge <input type="checkbox"/> Felony Charge

Apartment Applicants must complete this section; Co-Signers do not need to complete this section.

Expected move in date?	Deposit Amount Paid?	Rent to be paid?

Cars/Automobiles

Year	Make	Color	Model	License Plate
Year	Make	Color	Model	License Plate
Year	Make	Color	Model	License Plate

In case of Emergency, contact the following person:

NAME	PHONE	RELATIONSHIP	
ADDRESS	CITY	STATE	ZIP

1. Review our web site. http://www.27870.com/		
2. Do you own a kerosene space heater?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3. Do you have a lawn mower?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4. Do you have a vacuum cleaner?	<input type="checkbox"/> YES	<input type="checkbox"/> NO

The top box is for Office Use Only

<input type="checkbox"/> Copy of License	<input type="checkbox"/> Verified ID	<input type="checkbox"/> Deposit Paid	<input type="checkbox"/> Application signed.
<input type="checkbox"/> Verified Income	<input type="checkbox"/> Pay Stub	<input type="checkbox"/> Credit Report	<input type="checkbox"/> Criminal Report
<input type="checkbox"/> Application Fee Paid			
<input type="checkbox"/> Approved	<input type="checkbox"/> Insufficient Income	<input type="checkbox"/> No References	<input type="checkbox"/> Insufficient Information
<input type="checkbox"/> Rejected for other Reasons			