

For Office Use Only:

Move-In Date: _____ Leasing Agent: _____ Date Of First Visit: _____
Date Taken: _____ Bldg/Apt: _____
Rent Amount: \$ _____ Sec. Dep. Amt.: _____

APPLICANT INFORMATION:

Last Name: _____ First Name: _____ M.I. _____ SS#: _____ - _____ - _____
Present Phone Number: () _____ - _____ Cell/Pager: () _____ - _____ **DOB** _____
Present Address: _____ City: _____ State: _____ Zip: _____
Date of Occupancy – From: _____ To _____ Landlord’s Name & Phone #: _____
Previous Address: _____ City: _____ State: _____ Zip: _____
Date of Occupancy – From: _____ To _____ Landlord’s Name & Phone #: _____
Current Employer: _____ Address: _____
City: _____ State: _____ Zip Code: _____ Phone Number: () _____ - _____
Annual Income: \$ _____ Position: _____ How Long: _____
Supervisor: _____ Supervisor’s Phone Number: () _____ - _____

CO-APPLICANT INFORMATION:

Last Name: _____ First Name: _____ M.I. _____ SS#: _____ - _____ - _____
Present Phone Number: () _____ - _____ Cell/Pager: () _____ - _____ **DOB** _____
Present Address: _____ City: _____ State: _____ Zip: _____
Date of Occupancy – From: _____ To _____ Landlord’s Name & Phone #: _____
Previous Address: _____ City: _____ State: _____ Zip: _____
Date of Occupancy – From: _____ To _____ Landlord’s Name & Phone #: _____
Current Employer: _____ Address: _____
City: _____ State: _____ Zip Code: _____ Phone Number: () _____ - _____
Annual Income: \$ _____ Position: _____ How Long: _____
Supervisor: _____ Supervisor’s Phone Number: () _____ - _____

Please list any dependents that will occupy your apartment:

Name: _____ Over 18 years Yes / No
Name: _____ Over 18 years Yes / No

PET INFORMATION: Any pets: Yes / No - If yes, what kind: _____

VEHICLE INFORMATION:

Year: _____ Type: _____ Model: _____ Color: _____ Plate #: _____ State: _____
Year: _____ Type: _____ Model: _____ Color: _____ Plate #: _____ State: _____

EMERGENCY NOTIFICATION:

Name: _____ Address: _____ Relationship: _____
City: _____ State: _____ Phone Number: () _____ - _____

PLEASE READ CAREFULLY BEFORE SIGNING

The undersigned represents that all of the above statements are true and complete and hereby authorize verification of such information through any credit bureau service or otherwise to check credit, criminal background, verify employment, landlord’s references, or any information pertaining to this application. If accepted, the undersigned agrees to execute upon presentation, management’s standard lease form upon the term and conditions therein contained. False or incomplete information given shall be grounds for Management’s rejection of this application or termination of applicant’s lease and right of occupancy, upon discovery of such false statement, if a lease has been entered into with the undersigned.

Applicant Date Co-Applicant Date

