

CURRENT INCOME

RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated.

						-					
PERSONAL IN	FORMA'	ΓΙΟΝ									
FIRST NAME					LAST			S.S.#			
DATE OF BIRTH		MARITAL STATU	S				DRIV		PRIVERS LICENSE # STATE		
PHONE PHO			PHONE	NE EXT.				EMAIL			
PRESENT HOME ADDRESS	CITY/STATE/ZIP										
LENGTH OF TIME			PRESENT LA	ANDLORD	I	LANDLO			ORD PHONE		
REASON FOR LEAVING					RENT Is		Is your presen	Is your present rent up to date?			
PREVIOUS HOME ADDRESS				CITY/STATE/ZIP							
LENGTH OF TIME			PREVIOUS L	ANDLORD				LANDLORD PHONE			
REASON FOR LEAVING					AMOUNT OF F	MOUNT OF RENT			Was your rent up to date?		
NEXT PREVIOUS HOME ADDRESS				CITY/STATE/ZIP							
LENGTH OF TIME			NEXT PREVI	OUS LANDLORD					LANDLORD PHONE		
REASON FOR LEAVING					AMOUNT OF F	RENT	Was your rent up to date?				
PROPOSED OF	CLIPAN	IT(S)									
PROPOSED OCCUPANT(S) NAME RELATIONSHIP						OCCUPATION	CCUPATION			AGE	
NAME RE		RELATIO	ONSHIP			OCCUPATION			AGE		
NAME REL			ONSHIP		OCCUPATION				AGE		
NAME RELA			IONSHIP			OCCUPATION			AGE		
NAME RELA			TIONSHIP			OCCUPATION			AGE		
DDODOSED DE	T(C)										
PROPOSED PET(S) NAME TYPE/BREED									AGE		
		TYPE/B	REED							AGE	
		TYPE/B	REED						AGE		
VEHICLE(S) IN		TION									
EAR MAKE		MODEL		COLOR		PLATE #		STATE			
YEAR	MAKE		MODEL		COLOR		PLATE #		STATE	SIAIE	
EMPLOYMENT	7										
CURRENT EMPLOYER				OCCUPATION				HOURS/WEEK			
SUPERVISOR				PHONE EXT:				YE	YEARS EMPLOYED		
ADDRESS				CITY/STATE/ZIP							
CURRENT EMPLOYER				OCCUPATION				HC	HOURS/WEEK		
SUPERVISOR				PHONE EXT:				YE	YEARS EMPLOYED		
ADDRESS				CITY/STATE/ZIP							
INCOME											
CURRENT INCOME				SOURCE				PRO	PROOF OF INCOME		
CURRENT INCOME				SOURCE				PRO	PROOF OF INCOME		

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PROOF OF INCOME

SOURCE



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	Please fill ou	t this form COMPLETELY and	sign where indicate	ated.				
CREDIT CARD / FINAN	CIAL IN	FORMATION						
CAR LOAN LIEN HOLDER		BALANCE MONTHLY OWED PAYMENT			CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED	MONTHLY PAYMENT		CREDITOR'S PHONE #			
CHILD SUPPORT/ OTHER CREDIT OWED		BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #				
BANK ACCOUNT NAME OF BANK		BALANCE	MONTHLY PAYMENT		ACCOUNT NUMBER			
EMERGENCY / PERSON	AL REF	ERENCE INFORMAT						
EMERGENCY CONTACT		PHONE PHONE						
RELATION		ADDRESS CITY/			TE/ZIP			
EMERGENCY CONTACT		PHONE PHONE						
RELATION		ADDRESS	CITY/STATE/ZIP					
PERSONAL REFERENCE		PHONE	PHONE					
RELATION		ADDRESS	CITY/STATE/ZIP					
PERSONAL REFERENCE		PHONE	PHONE					
RELATION		ADDRESS	CITY/STATE/ZIP					
APPLICANT OUESTION	NAIRE	/ AUTHORIZATION						
	APPLICANT QUESTIONNAIRE / AUTHORIZATION as applicant ever been sued for bills? YES NO Has applicant ever been locked out of their apartment by the sheriff? YES NO							
	res no	Has applicant ever been brought to co		YES	NO			
	res no	Has applicant ever moved owing rent	NO					
	res no	Has applicant ever moved owing rent or damaged an apartment? YES NO Is the total move-in amount available now (rent and deposit)? YES NO						
Applicant authorizes the landlord to contact past All information is true, accurate and complete to ANY PERSON OR FIRM IS AUTHORIZED TO RELE X APPLICANT SIGNATURE	the best of app	olicant's knowledge. Landlord reserves th	ne right to disqualify t	enant if inform	nation is not	as represented.		
If you have any ques	tions about the	interpretation or legality of this form, p	lease consult an attor	rney or other q	ualified pers	son.		
NOTES:								

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