



**Office Use**

Community: \_\_\_\_\_  
 Date of Application: \_\_\_/\_\_\_/\_\_\_ Desired Move-in Date: \_\_\_/\_\_\_/\_\_\_  
 Apt. # / Type: \_\_\_\_\_  
 Quoted Rent: \_\_\_\_\_ Special(s) Offered: \_\_\_\_\_  
 Lease Term: \_\_\_\_\_  
 Referred By: \_\_\_\_\_

**Residential Rental Application**

Please print plainly and fill in ALL blank spaces completely. All information is confidential.

**APPLICANT**

Full Name: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_ Social Security No.: \_\_\_-\_\_\_-\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Best Contact #: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Time at Present Address: \_\_\_\_\_ Amount of Rent/Mtg. Pymt: \_\_\_\_\_  
 Landlord or Management Co.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Landlord Email/Phone: \_\_\_\_\_  
 Applicant's Driver's License Number: \_\_\_\_\_  
 Reason for Relocating: \_\_\_\_\_

**CO-APPLICANT**

Full Name: \_\_\_\_\_  
 Date of Birth: \_\_\_/\_\_\_/\_\_\_ Social Security No.: \_\_\_-\_\_\_-\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Best Contact #: \_\_\_\_\_  
 Email Address: \_\_\_\_\_  
 Time at Present Address: \_\_\_\_\_ Amount of Rent/Mtg. Pymt: \_\_\_\_\_  
 Landlord or Management Co.: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Landlord Email/Phone: \_\_\_\_\_  
 Applicant's Driver's License Number: \_\_\_\_\_  
 Reason for Relocating: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Status:  Employed Full/Part-Time  Unemployed  Retired  
 EMPLOYED BY: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 How Long? \_\_\_\_\_ Gross Income: \$ \_\_\_\_\_ per \_\_\_\_\_  
 PREVIOUS EMPLOYER (if less than one (1) year at present): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 How Long? \_\_\_\_\_ Gross Income: \$ \_\_\_\_\_ per \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Status:  Employed Full/Part-Time  Unemployed  Retired  
 EMPLOYED BY: \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 How Long? \_\_\_\_\_ Gross Income: \$ \_\_\_\_\_ per \_\_\_\_\_  
 PREVIOUS EMPLOYER (if less than one (1) year at present): \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 How Long? \_\_\_\_\_ Gross Income: \$ \_\_\_\_\_ per \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_

**ADDITIONAL INFORMATION**

Number of Vehicles (including Company Cars): \_\_\_\_\_

Make/Model: _____	Year _____	Color _____	Tag No. _____	State _____
Make/Model: _____	Year _____	Color _____	Tag No. _____	State _____
Make/Model: _____	Year _____	Color _____	Tag No. _____	State _____

Pets? Yes \_\_\_ No \_\_\_ #Cat(s): \_\_\_ #Dog(s): \_\_\_

PET NAME	COLOR	BREED	WEIGHT	AGE	LICENSE #
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Total Number of Occupants \_\_\_\_\_

OTHER RESIDENTS

BIRTH DATE

_____	_____
_____	_____
_____	_____
_____	_____

**IN CASE OF PERSONAL EMERGENCY, NOTIFY:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

Telephone(s): \_\_\_\_\_

**NON-REFUNDABLE CREDIT CHECK AND PROCESSING CHARGE**

Applicant submits herewith a non-refundable payment in the amount of \$\_\_\_\_\_ for credit/criminal background check and processing charge. If application is not approved, said sum will be retained by management to cover the cost of processing this application. Any false information will constitute grounds for rejection of application. Management or his/her agent is hereby expressly authorized to verify the accuracy and correctness of the statements contained herein, to communicate with applicant's employers and creditors, and to procure such other information which management or agent may require to evaluate this application. **NOTE: Application must be signed before it can be processed by management.**

**GOOD FAITH DEPOSIT**

A good faith deposit in the amount of \$\_\_\_\_\_ is submitted with this application. If application is approved, this good faith deposit can be applied toward payment of applicant's security deposit of \$\_\_\_\_\_, non-refundable lease fee of \$\_\_\_\_\_ and non-refundable administrative fee of \$\_\_\_\_\_ which are due prior to taking possession of the apartment; and applicant agrees to execute management's usual rental agreement on or before the occupancy date set out in this application. If for any reason management rejects this application, the good faith deposit submitted herewith will be refunded in full to applicant. Applicant may cancel this application by written notice within 48 hours and receive a full refund of the good faith deposit. If applicant cancels this application after 48 hours or fails to execute management's usual rental agreement, or refuses to occupy the premises on the agreed upon date, the good faith deposit will be forfeited.