



# 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 INFORMATION

|  |  |      |   |       |   |
|--|--|------|---|-------|---|
| FIRST NAME   | MIDDLE   | LAST | S.S.#   | -     | - |
| DATE OF BIRTH / /  | MARITAL STATUS<br><input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED Since _____ <input type="checkbox"/> DIVORCED Since _____ |      | DRIVERS LICENSE #   | STATE |   |
| PHONE - -<br><input type="checkbox"/> CELL <input type="checkbox"/> HOME | PHONE - -<br><input type="checkbox"/> HOME <input type="checkbox"/> WORK   | EXT. | EMAIL   |       |   |
| PRESENT HOME ADDRESS   |  |      | CITY/STATE/ZIP  |       |   |
| LENGTH OF TIME   | PRESENT LANDLORD   |      | LANDLORD PHONE - -  |       |   |
| REASON FOR LEAVING   | AMOUNT OF RENT   |      | Is your present rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO |       |   |
| PREVIOUS HOME ADDRESS  |  |      | CITY/STATE/ZIP  |       |   |
| LENGTH OF TIME   | PREVIOUS LANDLORD  |      | LANDLORD PHONE - -  |       |   |
| REASON FOR LEAVING   | AMOUNT OF RENT   |      | Was your rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO        |       |   |
| NEXT PREVIOUS HOME ADDRESS   |  |      | CITY/STATE/ZIP  |       |   |
| LENGTH OF TIME   | NEXT PREVIOUS LANDLORD   |      | LANDLORD PHONE - -  |       |   |
| REASON FOR LEAVING   | AMOUNT OF RENT   |      | Was your rent up to date? <input type="checkbox"/> YES <input type="checkbox"/> NO        |       |   |

## PROPOSED OCCUPANT(S)

|      |              |            |     |
|------|--------------|------------|-----|
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |
| NAME | RELATIONSHIP | OCCUPATION | AGE |

## PROPOSED PET(S)

|      |            |  |     |
|------|------------|--|-----|
| NAME | TYPE/BREED | <input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR | AGE |
| NAME | TYPE/BREED | <input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR | AGE |
| NAME | TYPE/BREED | <input type="checkbox"/> INDOOR <input type="checkbox"/> OUTDOOR | AGE |

## VEHICLE(S) INFORMATION

|      |      |       |       |         |       |
|------|------|-------|-------|---------|-------|
| YEAR | MAKE | MODEL | COLOR | PLATE # | STATE |
| YEAR | MAKE | MODEL | COLOR | PLATE # | STATE |

## EMPLOYMENT

|                  |                |                |
|------------------|----------------|----------------|
| CURRENT EMPLOYER | OCCUPATION     | HOURS/WEEK     |
| SUPERVISOR       | PHONE - - EXT: | YEARS EMPLOYED |
| ADDRESS          | CITY/STATE/ZIP |                |
| CURRENT EMPLOYER | OCCUPATION     | HOURS/WEEK     |
| SUPERVISOR       | PHONE - - EXT: | YEARS EMPLOYED |
| ADDRESS          | CITY/STATE/ZIP |                |

## INCOME

|  |        |  |
|--|--------|--|
| CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY | SOURCE | PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO |
| CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY | SOURCE | PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO |
| CURRENT INCOME \$ _____ <input type="checkbox"/> WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> YEARLY | SOURCE | PROOF OF INCOME <input type="checkbox"/> YES <input type="checkbox"/> NO |

