		Rental Application			
Property applying for:			OUR FAX	(# 866-436-4661	
Reason you are moving:			-		
Applicant Information	Name:				
SSN:		Birthdate:	Phone:		
Current Address:		•	•		
City:		State:	ZIP:		
Do you own or rent?	Monthly paymer	nt or rent:	How long	?	
Landlord name and phone:			Do you pa	ay by cash or check?	
Previous Address:					
City:		State:	ZIP:		
Did you own or rent?	Monthly paymer	nt or rent:	How long	?	
Landlord name and phone:			Did you p	ay by cash or check?	
Employment Information	Current Employ	er:			
Employer Address:			How long	?	
Phone:	City:		State:		
Position: Are	you paid hourly o	r salary?	Annual in	come:	
Do you have any other incom	e?				
Co-Applicant Information	Name:				
SSN:		Birthdate:	Phone:		
Current Address:			•		
City:		State:	ZIP:		
Do you own or rent?	Monthly paymer	nt or rent:	How long?		
Landlord name and phone:			Do you pa	ay by cash or check?	
Previous Address:					
City: State:		State:	ZIP:		
Did you own or rent?	Monthly paymer	nt or rent:	How long?		
Landlord name and phone:			Did you p	ay by cash or check?	
Co-Applicant Employment I	nformation	Current Employer:			
Employer Address:			How long?		
Phone:	City:	City:		State:	
Position: Are you paid hourly or salary?			Annual in	Annual income:	
Do you have any other incom	e?				
Other occupants including age & relationship					
Have you filed a petition for b Have you ever been evicted f			efused to pay	rent when due?	
What kind of animals do yo	u have?				
I authorize obtaining a credit report and the verification of information p				ovided on this form.	
Signature of Applicant:				Date:	
Signature of Co-Applicant:				Date:	