

Apartment Application Form

Applicant Information

Your Name *

Date *

Present Address *

City, State, Zip *

 Present Phone#*

Own Home Monthly Rent

E-mail Address

Previous Address

City, State, Zip

Employment Information

Current Employer *

Supervisor *

Employer's Address *

City, State, Zip*

Your Occupation *

 Business Phone #*

Present Salary *

Length of Time Employed Here *

City, State, Zip*

Length of Time Employed There

Previous Employer

Landlord Information

Present Landlord

 Phone #

Landlord's Address

City, State, Zip

Length of Time There

Marital Status *

Single Engaged Married Separated Divorced

List all persons who will occupy the apartment:

1. Name *	DOB	SS#	Applicant
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2. Name	DOB	SS#	Relation
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3. Name	DOB	SS#	Relation
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Make of Car #1 *	Model	Year	Color
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L cense Plate #

Make of Car #2 *	Model	Year	Color
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L cense Plate #

Have you or any occupant listed ever been convicted of a felony: * Yes No

Other

Driver's License # *

State Issued *

Expiration *

Deposit: If this application is accepted, a non-refundable security deposit equal to one month's rent will be due immediately. The first month's rent is due 15 days before your move-in date.

Credit Information: All references for income, landlord, and credit will be verified. Credit is checked and a favorable report free of collections, judgments, bankruptcy, and delinquencies is necessary for acceptance. The above information is correct to the best of my knowledge. I (we) have no objection to inquiries for the purpose of verifying the facts herein stated, by means of a credit report, landlord, and income verification.

Applicant Printed Name *

Applicant Printed Name *

Applicant Signature *

Applicant Signature *