## **LEASE APPLICATION**

## **PERSONAL INFORMATION**

Date	Interviewed By			
Name of Applicant				
Email Address				
Social Security No	Driver's License No. & State			
Present Address				
City	State	Zip Code		
How long have you lived at present ad	ldress?			
Name of Landlord	Telephone			
Prior Address				
City	State	Zip Code		
How long have you lived at prior addre	ess?			
Name of Landlord	Telephone			
Birth Date Ho	ow many in your family? Adults	Children	Pets	
Employer	Telephone			
Position	How long?			
SPOUSE INFORMATION				
Name	Telephone			
Email				
Social Security No	Driver's License No. & S	State		
Employer	Telephone			
Position	How long?	How long?		
BANK INFORMATION				
Bank Name	Telephone			
Address				
Chacking Assount No.				

## PERSONAL REFERENCES NAME RELATIONSHIP **TELEPHONE** OTHER INFORMATION No. of Vehicles (including company cars) Make/Model \_\_\_\_\_ Year \_\_\_\_ Color \_\_\_\_ Tag No. \_\_\_\_ State \_\_\_\_ Make/Model \_\_\_\_\_ Year \_\_\_\_ Color \_\_\_\_ Tag No. \_\_\_\_ State \_\_\_\_ HAVE YOU EVER Filed for Bankruptcy? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_ Been served an eviction notice or been asked to vacate a property you were renting? Yes No Willfully or intentionally refused to pay rent when due? Yes \_\_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_ How were you referred to us? Craig's List \_\_\_\_\_ List Serve \_\_\_\_ Other \_\_\_\_ Rental Unit applied for \_\_\_\_\_\_ Commencement date \_\_\_\_\_ Term \_\_\_\_ Rent/Month \_\_\_\_\_ **DISCLOSURE** I/We, the undersigned, understand that is the leasing agent and represents live for the owner/landlord and that the leasing agent's fees will be paid by the owner/landlord. The undersigned acknowledge that this written notice was received prior to the undersigned receiving a lease agreement.

RADON GAS — Notice to Prospective Tenant: Radon is a naturally occurring radioactive gas that, when it has accumulated in a building in sufficient quantities, may present health risks to persons who are exposed to it over time. Levels of radon that exceed federal and state guidelines have been found in this state. Additional information regarding radon and radon testing may be obtained from your county public health unit.

I/We declare the foregoing information is true and correct, and I/We hereby authorize you to conduct an employment, credit and criminal check and to verify our references.

Applicant's Signature	Date	Co-Applicant's Signature	Date

## FOR OFFICE USE ONLY – DO NOT WRITE BELOW

Application Verification	Person Contacted	Remarks			
Present Landlord					
Previous Landlord					
Applicant's Employment					
Co-Applicant's Employment					
Bank					
Reference (1)					
Reference (2)					
Reference (3)					
Other					
Driver's License/ID					
Credit Bureau					
Verification complete by		Date			
Remarks					
THIS APPLICATION					
Approved Not Approved					
	T	T			
	Monies Received				
Date	Description	Amount			
	Applicant Fee				
	Deposit				

First Month's Rent