



Housing Opportunities

RENTAL APPLICATION

Today's Date: _____ Occupancy date desired: _____

Applicant's Personal Information

Last Name _____ First _____ Middle _____

Birth Date _____ Driver's License/ID number/state _____

Social Security # _____ Email address _____

Phone _____ Current Address _____

Additional Occupants (List every occupants' name and their relationship below, including children)

Are you able to handle all the minor maintenance/upkeep in the property? Yes _____ No _____

Do you have renter's insurance? Yes _____ No _____

Do you have any water-filled furniture? Yes _____ No _____

Have you ever broken a lease? Yes _____ No _____

Have you ever refused to pay rent for any reason? Yes _____ No _____

Have you ever been evicted or asked to leave a rental unit? Yes _____ No _____

Have you ever filed bankruptcy? Yes _____ No _____

Have you ever been convicted of a crime? Yes _____ No _____

Will you give us permission to do a criminal background check? Yes _____ No _____

Currently have any utilities in your name? Yes _____ No _____

Currently have phone service in your name? Yes _____ No _____

Do you know of anything or any reason that may interrupt your ability to pay rent? Yes _____ No _____



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RESIDENCE HISTORY

1. Present street address: _____
City: _____ State: _____ ZIP: _____
Dates lived at this address: _____ Own: _____ Rent: _____ Occupy: _____
Current Phone: _____
How many pets do you have? _____ Type: _____
Name of present landlord/owner/mortgage company _____
Address of present landlord/owner/mortgage company _____
Landlord's phone: _____ Monthly payment: _____
Reason for moving: _____ Is your rent/mortgage current? Yes _____ No _____
Number of late payments? _____ Security deposit amount currently held by landlord? _____

2. Previous residence address: _____
Previous landlord: _____ Previous landlord's phone: _____
Dates at this address: _____ Reason for moving: _____
Was your full security deposit returned: Yes _____ No _____
Monthly payment: _____ Number of late payments: _____

Previous residence address: _____
Previous landlord: _____ Previous landlord's phone: _____
Dates at this address: _____ Reason for moving: _____
Was your full security deposit returned: Yes _____ No _____
Monthly payment: _____ Number of late payments: _____

INCOME HISTORY

1. Applicant's current employment status:
Full time ___ Part-time(less than 32 hrs.) ___ Student ___ Retired ___ Self-employed ___
Unemployed ___ Other _____
Primary Source of Employment:
Applicant employed by: _____ Supervisor's Name: _____
Average weekly hours: _____ How long at this place of employment? _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone: _____ Position: _____ Salary: _____

Please indicate weekly, biweekly, monthly, or annual average take home: _____

2. Additional Employment

Employed by: _____ Supervisor's Name: _____

Average weekly hours: _____ How long at this place of employment? _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Position: _____ Salary: _____

Please indicate weekly, biweekly, monthly, or annual average take home: _____

EMERGENCY CONTACT INFORMATION

1. Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Alternate phone: _____

2. Name: _____ Relationship: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Alternate phone: _____

ADDITIONAL INFORMATION

If there are additional, verifiable sources of income you would like considered, please list income source (e.g., self-employment, social security, benefit payments), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

1. Additional Source: _____ Amount: \$ _____ Per: _____

Contact Person: _____ Phone: _____

How long have you been receiving income from this source? _____

How long do you expect this income to continue? _____

Is there any reason it would stop? _____

2. Additional Source: _____ Amount: \$ _____ Per: _____

Contact Person: _____ Phone: _____

How long have you been receiving income from this source? _____

How long do you expect this income to continue? _____

Is there any reason it would stop? _____

ASSET/CREDITS/LOANS

1. Number of vehicle on property? _____

Valid registration and inspection? Yes _____ No _____

Vehicle 1 (make/model/color/year): _____

Please note only cars on application are authorized to be on premises.

Plate number: _____ State: _____

Financed/leased through: _____

Contact and phone number: _____

Acct. #: _____ Monthly Payment: _____

Vehicle 2 (make/model/color/year): _____

Please note only cars on application are authorized to be on premises.

Plate number: _____ State: _____

Financed/leased through: _____

Contact and phone number: _____

Acct. #: _____ Monthly Payment: _____

BANK REFERENCE

Name of bank and branch: _____

Branch address: _____

Checking Acct. #: _____

Savings Acct. #: _____

How long has account been active: Checking _____ Savings _____

Average monthly balance: Checking \$ _____ Savings \$ _____

PERSONAL/PROFESSIONAL REFERENCES

1. Name of nearest living relative:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Relationship: _____ How long? _____ Phone: _____

2. Character/personal reference:

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Relationship: _____ How long? _____ Phone: _____

3. Professional reference (e.g., attorney, accountant):

Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Relationship: _____ How long? _____ Phone: _____

Do you give owner or manager permission to contact references listed above both now and in the future for rental consideration or for collection purposes should they be deemed necessary? Yes ____ No ____

If management has a question regarding this application, please furnish the best contact phone number:

Day phone/contact person: _____

Night phone/contact person: _____

Thank you!

Thank you for completing an application to rent from us. Please sign below. Please note that a completed application requires submission of the following, which will be copied and attached to this application:

_____ Driver's License or sheriff's picture ID.

Note: Rentals will not be shown without picture ID.

_____ Personal check (to verify bank)

_____ 2 weeks of most current pay stubs of each income source listed

_____ If self-employed, most current Schedule C tax return and proof of income

A fee of \$30 is charged on all rental applications of the purpose of verifying the information furnished on this application. By signing below, applicant hereby represents all information on this application is true, completed and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is refundable/non-refundable/or only refundable if applicant meets our minimal criteria but is not selected because they were not the first qualified applicant.

