

APPLICANT'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ SS #: \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

MARITAL STATUS: \_\_\_\_\_ DRIVER'S LIC #: \_\_\_\_\_ STATE: \_\_\_\_\_

SPOUSE'S NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_/\_\_\_\_/\_\_\_\_ SS #: \_\_\_\_\_

OTHER OCCUPANTS:

Name	Age	Relationship	Name	Age	Relationship
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

PRESENT ADDRESS: \_\_\_\_\_  
Street Apt # City State Zip Code

DATE'S: From \_\_\_\_\_ To \_\_\_\_\_ Present Landlord/Resident Mgr. Phone # \_\_\_\_\_

MONTHLY PAYMENT: \_\_\_\_\_ REASON FOR MOVING: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

DATE'S: From \_\_\_\_\_ To \_\_\_\_\_ Present Landlord/Resident Mgr. Phone # \_\_\_\_\_

HAVE YOU EVER BEEN EVICTED FROM ANY LEASED PREMISES? \_\_\_\_\_ IF YES EXPLAIN, \_\_\_\_\_

PRESENT EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ Street City State Zip PHONE #: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ EMPLOYED SINCE: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ Street City State Zip PHONE #: \_\_\_\_\_

SPOUSE'S EMPLOYER: \_\_\_\_\_ POSITION: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_ Street City State Zip PHONE #: \_\_\_\_\_

SUPERVISOR: \_\_\_\_\_ EMPLOYED SINCE: \_\_\_\_\_

YEAR & MAKE: \_\_\_\_\_ COLOR: \_\_\_\_\_ TAG # & STATE: \_\_\_\_\_ REGISTERED TO: \_\_\_\_\_

YEAR & MAKE: \_\_\_\_\_ COLOR: \_\_\_\_\_ TAG # & STATE: \_\_\_\_\_ REGISTERED TO: \_\_\_\_\_

DO YOU OWN ANY PETS? \_\_\_\_\_ IF SO, HOW MANY? \_\_\_\_\_ KIND \_\_\_\_\_ WEIGHT \_\_\_\_\_ COLOR \_\_\_\_\_

BANKING INFORMATION:

BANK NAME: \_\_\_\_\_ DO YOU HAVE A:  CHECKING AND/OR  SAVINGS

TOTAL ANTICIPATED INCOME FROM DATE OF MOVE-IN THROUGH THE NEXT 12 MONTHS

\* ANNUAL SALARY (INCLUDING FEES, TIPS, COMMISSION & BONUSES) \$ \_\_\_\_\_

\* ANNUAL SALARY FOR SPOUSE \$ \_\_\_\_\_

\*\*ADDITIONAL ANNUAL INCOME (CHILD SUPPORT, PARENTAL SUPPORT) \$ \_\_\_\_\_  
SOURCE: \_\_\_\_\_

Applicant has submitted the sum of \$ \_\_\_\_\_ 100.00 \_\_\_\_\_ which is a non-refundable payment for credit and criminal background check. This amount will be retained by management to cover the cost of processing; any false information will result in denial of application.

To undersigned warrants and represents the information on this application to be true and correct. All persons/ or firms named may freely give any requested information concerning me and I hereby waive all rights of action for any consequences resulting from such application.

APPLICANT SIGNATURE \_\_\_\_\_ SPOUSE SIGNATURE \_\_\_\_\_