

INCOME

## RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married). Please fill out this form **COMPLETELY** and sign where indicated. All data herein is deemed confidential.

PERSONAL IN	FORMA'	ΓΙΟΝ										
FIRST NAME		MIDDLE		LAST			S.S.#					
DATE OF BIRTH		RENTING WITH	OTHER TENAN	TS? IF SO, WHO?	L			DRIVERS LICENSE # STATE				
PHONE	DNE		PHONE EXT.					EMAIL	EMAIL			
PRESENT HOME ADDRESS					CITY/STATE/ZII	)						
LENGTH OF TIME	PRESENT LANDLORD			LAN			ANDLORD PHONE					
REASON FOR LEAVING	AMOUNT OF			ENT	ls your pre	Is your present rent up to date?						
PREVIOUS HOME ADDRESS				CITY/STATE/ZIP								
LENGTH OF TIME			PREVIOUS LANDLORD				LANDLORD PHONE					
REASON FOR LEAVING	AMOUNT OF			RENT Wa			Vas your rent up to date?					
NEXT PREVIOUS HOME ADDRESS					CITY/STATE/ZIP				1			
LENGTH OF TIME			NEXT PREVI	OUS LANDLORD				LANDLORD PHONE				
REASON FOR LEAVING			AMOUNT OF			RENT Was y			our rent up to date?			
DDODOSED O	CCLIDAN	TT(C)										
PROPOSED OCCUPANT(S)  NAME RELATIONSHII				OCCUPATION				AGE				
NAME R			ELATIONSHIP			OCCUPATION				AGE		
NAME			RELATIONSHIP			OCCUPATION			AGE			
NAME			RELATIONSHIP			OCCUPATION			AGE			
NAME REL/			ONSHIP			OCCUPATION			AGE			
DDODOCED DE	T(C)											
PROPOSED PET(S) NAME TYPE			BREED							AGE		
NAME		TYPE/B	TYPE/BREED							AGE		
NAME		TYPE/B	TYPE/BREED						AGE			
						_						
VEHICLE(S) IN		TION										
YEAR			MODEL		COLOR		PLATE #			STATE		
YEAR	MAKE	MODEL		COLOR		PLATE #		STATE		=		
<b>EMPLOYMENT</b>												
CURRENT EMPLOYER				OCCUPATION						HOURS/WEEK		
SUPERVISOR			PHONE			EXT:			YEARS EMPLOYED			
ADDRESS				CITY/STATE/ZIP				•				
CURRENT EMPLOYER				OCCUPATION			HOURS/WEEK					
SUPERVISOR				PHONE EXT:			YEARS EMPLOYED					
ADDRESS				CITY/STATE/ZIP								
INCOME												
CURRENT				SOURCE				PROOF OF INCOME				
INCOME  CURRENT INCOME				SOURCE				PROOF OF INCOME				
CURRENT		SOURCE				PROOF OF INCOME						

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	Please fill o	out this form <b>COMPI</b>	L <b>ETELY</b> and	sign where indicate	ated.				
CREDIT CARD / FINA	NCIAL II	NFORMATIO	N						
CAR LOAN LIEN HOLDER		BALANCE MONTHLY OWED PAYMENT				CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED		MONTHLY PAYMENT		CREDITOR'S PHONE #			
CREDIT CARD COMPANY		BALANCE OWED		MONTHLY PAYMENT	CREDITOR'S PHONE #				
CHILD SUPPORT/ OTHER CREDIT OWED		BALANCE OWED		MONTHLY PAYMENT	CREDITOR'S PHONE #				
BANK ACCOUNT NAME OF BANK		BALANCE		MONTHLY PAYMENT	ACCOUNT NUMBER				
EMERGENCY / PERSO	NAL REI	FERENCE IN	FORMAT	TION					
EMERGENCY CONTACT		PHONE			PHONE				
RELATION		ADDRESS			CITY/STATE/ZIP				
EMERGENCY CONTACT		PHONE	PHONE			PHONE			
RELATION		ADDRESS	ADDRESS			CITY/STATE/ZIP			
PERSONAL REFERENCE		PHONE	PHONE			PHONE			
RELATION		ADDRESS	ADDRESS			CITY/STATE/ZIP			
PERSONAL REFERENCE		PHONE	PHONE			PHONE			
RELATION		ADDRESS			CITY/STATE/ZIP				
APPLICANT QUESTIO	NNAIRE	E / AUTHORIZ	ZATION						
Has applicant ever been sued for bills?	YES NO	Has applicant ever bee		their apartment by th	ne sheriff?	YES	NO		
Has applicant ever been bankrupt?	YES NO	Has applicant ever bee	ord?	YES	NO				
Has applicant ever been guilty of a felony?	YES NO	Has applicant ever moved owing rent or damaged an apartment? YES					NO		
Has applicant ever broken a Lease?	YES NO	Is the total move-in an	Is the total move-in amount available now (rent and deposit)?						
Applicant authorizes the landlord to contact p All information is true, accurate and complete ANY PERSON OR FIRM IS AUTHORIZED TO R  X APPLICANT SIGNATURE	e to the best of a	pplicant's knowledge. Land	dlord reserves th	ne right to disqualify t	enant if inform	nation is not	as represented.		
If you have any q	uestions about t	he interpretation or legalit	y of this form, p	lease consult an attor	rney or other q	ualified per	son.		
NOTES:									

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