

MANAGER CO-SIGNER W/ CURRENT TENANTS COMMENTS MOVE IN SPECIAL OTHER

APPLICATION TO RENT MOVE IN DATE _____ RENT \$ _____ APARTMENT # _____

IN THE EVENT OF CO-TENANTS OTHER THAN SPOUSE, USE SEPARATE FORMS FOR EACH APPLICANT.

APPLICANT'S Last Name First Middle Birthdate Driver's License # and State Soc. Sec. #

SPOUSE'S Last Name First Middle Birthdate Driver's License # and State Soc. Sec. #

Names and ages of other occupants Do you have a waterbed? Yes No Do you have pets? Yes No Do you have waterbed insurance? Yes No

RESIDENCE HISTORY TYPE OF PET(S) _____

APPLICANT'S Present Address (include apt. #) City State Zip Move-in Date Mo. Yr. State Zip Landlord Day Phone Landlord Night Phone

Name of Present Landlord Mortgage Co. Apartment Community Other (Please check one box)

PREVIOUS RESIDENCE HISTORY [PRINT AND FILL IN COMPLETELY INCLUDING ALL PHONE NUMBERS]

APPLICANT'S Previous Address (include apt. #) City State Zip Move-in Date Mo. Yr. State Zip Landlord Day Phone Landlord Night Phone

Name of Previous Landlord Mortgage Co. Apartment Community Other (Please check one box)

SPOUSE'S Previous Address (include apt. #) City State Zip Move-in Date Mo. Yr. State Zip Landlord Day Phone Landlord Night Phone

Name of Previous Landlord Mortgage Co. Apartment Community Other (Please check one box)

EMPLOYMENT HISTORY [PRINT AND FILL IN COMPLETELY INCLUDING ALL PHONE NUMBERS]

APPLICANT Employed By Supervisor's Name / C.O. Hire Date Mo. Yr. Salary per Mo. Hr. Position Held / Occupation

APPLICANT Previous Employment Supervisor's Name / C.O. Hire & Termination Dates Salary per Mo. Hr. Position Held / Occupation

SPOUSE Employed By Supervisor's Name / C.O. Hire Date Mo. Yr. Salary per Mo. Hr. Position Held / Occupation

SPOUSE Previous Employment Supervisor's Name / C.O. Hire Date Mo. Yr. Salary per Mo. Hr. Position Held / Occupation

CREDIT & LOAN REFERENCES

Auto #1 (Make & Model) License Plate State Car Payment made to Address Monthly Payment \$

Auto #2 (Make & Model) License Plate State Car Payment made to Address Monthly Payment \$

Other Vehicles (Boats, Vans, Motorcycles, R.V.'s, etc.) Make, Model License Plate

Loans, Charge Accounts & Credit Cards owed to Account # Address Total Debt \$

Bank or Savings and Loan Branch Address Checking Account #

ADDITIONAL INFORMATION

Name of APPLICANT'S Nearest Relative Relationship Address City State Zip Phone

Name of SPOUSE'S Nearest Relative Relationship Address City State Zip Phone

Emergency Contact Relationship Address City State Zip Phone

Emergency Contact Relationship Address City State Zip Phone

Has an eviction ever been filed against you? Applicant Yes No Date _____ Spouse Yes No Date _____

Have you ever pleaded guilty to, been convicted of, or have pending against you, a criminal charge? Applicant Yes No Spouse Yes No

BEST CONTACT PHONE NUMBER \$45.00

NON-REFUNDABLE APPLICANT(S) SCREENING CHARGE \$

In compliance with State and Federal laws, this is to inform you that an investigation involving the statements made on your rental application for tenancy at this above mentioned apartment complex is being initiated. You have the right to dispute the information reported. Direct inquiries to Bemrose Consulting. All or part of the above information may be made available to other services unless this box is checked. I / We certify that to the best of my knowledge all statements are true and complete. I / We further authorize Bemrose Consulting to obtain credit reports, character reports, verification of rental, employment and criminal history as necessary to verify all information put forth in the above reference application for tenancy. False, fraudulent or misleading information may be grounds for denial of tenancy, or subsequent eviction.

Signed _____ Tenant Signed _____ Dated _____ Title _____ Tenant Signed _____ Dated _____ Title _____ Landlord

I am aware that an incomplete application causes a delay in processing and may result in denial of tenancy.