Residential Lease Application



NOTE: We cannot properly evaluate incomplete applications. If a question is not applicable to you, please answer 'N/A'. If you can't recall the information being requested, please submit your application after you have had an opportunity to gather all of the requisite information. If there will be more than one adult that will be residing in the same unit, each adult must complete and submit their own, separate application and application fee. All fields marked "*" are required.

Rental unit street address for which you are applying:*

Co-signer signature:

General Information			
Full legal name:*		Drive	rs' license (and state):
Date of birth:*	SSN:*	·	Phone:*
Current address:*		E-ma	il address:
Own Rent Stay (circle)	Monthly payment o	or rent:*	Date moved in:*
Previous address:*			
Owned Rented (circle)	Monthly payment o	or rent:*	Date moved in:*
Number of adults (including yourself) in your household:*			Number of minors:*
Have you or an immediate family member	ever rented from us?	Yes No (circle)	If so, when?
Why are you moving?*	How long do you		expect to stay?
Employment & Income Informat	ion		
Current employer:*		Manager's	name:
Employer address:		1	Date started:*
Phone:*	E-mail:		Best time to call:
Position:	Wage type:* Hour	ly Salary (circle)	Gross monthly wage:*
Source(s) of other income:			Other income amount (mo):
Emergency Contact			
Name of a person not residing with you:			Relationship:
Address:			Phone:
Co-Signer Information (If Applie	able)		
Full Legal Name:			
Date of birth:	SSN:		Phone:
Current address:		E-ma	il address:
Own Rent Stay (circle)	Monthly payment o	or rent:	Date moved in:
Employer address:			Date started:
Phone:	E-mail:		Fax:
Position:	Wage type: Hour	rly Salary (circle)	Gross monthly wage:
Source(s) of other income:			Other income amount (mo):
Pet Information			
Do you have any pets?* Yes No (circle)	If 'Yes' con	nplete and submit a Residential Pet Application
Criminal History, Prior Eviction	s & Firearms		
Have you ever been convicted of a felony	?* Yes No (ci	rcle) Have you e	ever been subject to eviction?* Yes No (circle)
Do you have any outstanding judgments?	* Yes No (cir	rcle) Do you cur	rently own a firearm?* Yes No (circle)
Anything else about your past you feel mi	ght be relevant?	1	
Personal References (Two Requi	red)		
Name:*	Address:		Phone:*
Name:*	Address:		Phone:*
Name:	Address:		Phone:
			we have provided, including my/our credit, f the information provided is truthful and accurate.
Applicant signature:*			Date:*

Date: