



APPLICATION FOR TENANCY

Please Print

Address of Rental Premises: _____ Apt. # _____

How many bedrooms will you need?

Do you, or do you intend to have: Pets Yes No Waterbeds Yes No Motorcycles Yes No

Applicant #1

Last Name: _____ First Name: _____ Mid Initial: _____

Social Security Number: _____ Driver's License: _____

Home Phone #: _____ Work Phone #: _____ Birthdate: _____

Present Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

Dates you lived at this address: From _____ To _____ Were you evicted? _____

Landlord's Name: _____ Phone: _____

Previous Street Address: _____ Apt. #: _____

City: _____ State: _____ Zip Code: _____

How long did you live at this address? _____ Were you evicted? _____

Previous Landlord's Name at this address: _____ Phone: _____

Current Employer: _____ How long employed? _____

Contact Person: _____ Phone: _____

Address of where you work: _____

City: _____ State: _____ Zip Code: _____

Gross Monthly Wages: \$ _____ You are paid: Weekly Bi-weekly Monthly

Other Monthly Income: _____ How much? \$ _____

Primary Bank: _____ Savings Checking

Credit References: 1) _____ Phone: _____

2) _____ Phone: _____

Nearest Relatives or Friends (for emergency purposes):

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Applicant #2

Last Name:			First Name:			Mid Initial:		
Social Security Number:			Driver's License:					
Home Phone #:			Work Phone #:			Birthdate:		
Present Street Address:						Apt. #:		
City:			State:			Zip Code:		
Dates you lived at this address: From			To			Were you evicted?		
Landlord's Name:						Phone:		
Previous Street Address:						Apt. #:		
City:			State:			Zip Code:		
How long did you live at this address?						Were you evicted?		
Previous Landlord's Name at this address:						Phone:		
Current Employer:						How long employed?		
Contact Person:						Phone:		
Address of where you work:								
City:			State:			Zip Code:		
Gross Monthly Wages: \$			You are paid:			<input type="checkbox"/> Weekly <input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly		
Other Monthly Income:						How much? \$		
Primary Bank:						Savings <input type="checkbox"/> Checking <input type="checkbox"/>		
Credit References: 1)						Phone:		
2)						Phone:		
Relationship to Applicant #1:								

Names of Others Who Will Be Living with Applicant #1 & #2

1) Last Name:			First Name:			Mid Initial:		
Social Security #:			Driver's License #:					
2) Last Name:			First Name:			Mid Initial:		
Social Security #:			Driver's License #:					
3) Last Name:			First Name:			Mid Initial:		
Social Security #:			Driver's License #:					

The application fee is \$ _____ and is non-refundable. I hereby authorize the landlord to verify any and all information on this application, criminal report and/or on a credit report. I/We, the undersigned, authorize Rental Property Owner's Association (RPOA) to obtain resident screening information from Merchants Service Bureau/CBC Companies or other credit bureau, which MAY include credit history, rental history, criminal history, sexual offender history and terrorist information.

Signature of Applicant #1 _____ Date: _____ Time: _____

Signature of Applicant #2 _____ Date: _____ Time: _____