

APPLICATION FOR RESIDENCE

PROPERTY # _____

AGENT: _____

Proof of Renter's Insurance Required

APT.# _____

TYPE: _____

NAME OF APPLICANT _____ **DATE OF BIRTH** _____

(Co-applicant must complete separate application)

E-Mail Address _____ Phone # _____

Any other names used _____ **SOCIAL SECURITY #** _____

ALL OTHERS TO BE LIVING IN THE APARTMENT:

Name _____ Date of Birth _____ Social Security # _____

Name _____ Date of Birth _____ Social Security # _____

Name _____ Date of Birth _____ Social Security # _____

PRESENT ADDRESS

Street _____ City _____ State _____ Zip _____

How long _____ Owner, Agent or Manager _____ Manager's phone _____

If Apartment Community, Name of Property _____ Reason for leaving _____

PREVIOUS ADDRESS

Street _____ City _____ State _____ Zip _____

How long _____ Owner, Agent or Manager _____ Manager's phone _____

If Apartment Community, Name of Property _____ Reason for leaving _____

PRESENT EMPLOYER

How Long _____

Address _____ Telephone _____

Position _____ Supervisor _____ Salary per month _____

PREVIOUS EMPLOYER

How Long _____

Address _____ Telephone _____

Position _____ Supervisor _____ Salary per month _____

Other Income: Source / Name _____ Amount per month _____

CREDIT INFORMATION:

Bank (Checking) _____ Branch _____ Account # _____

Bank (Savings) _____ Branch _____ Account # _____

Bank (Loans) _____ Branch _____ Account # _____

CREDIT CARDS:

Card _____ Card Number _____ Credit Line _____ Exp. Date _____

Card _____ Card Number _____ Credit Line _____ Exp. Date _____

AUTOMOBILE INFORMATION:

Make _____ Model _____ Year _____ Color _____ License Plate# _____

Make _____ Model _____ Year _____ Color _____ License Plate# _____

Driver's License Number _____ State _____ Expiration Date _____

Address as shown on Driver's License _____

NOTIFY IN CASE OF EMERGENCY:

Name _____ Relation _____ Telephone _____

Address _____ Business phone _____

Are you being or have you ever been evicted? _____ Details _____

Applicant states the above information is true and correct and authorizes investigation and verification of any information contained herein.

DATE _____ **APPLICANT'S SIGNATURE** _____

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