Rental Application

The undersigned hereby makes applica			
Apartments, located in the Town of Spendard, 200, 200			
	LICANT INFOR		-1
AH	LICANT INFOR	WATION	
Name			
Current Residence Address			
City	State	Zip Code	
Mailing Address (if different)			
Current Home Telephone #			
Maiden Name (if applicable)		_	
Credit Check Information:			
Social Security Number		[Attach a photoco	py of your card]
Date of Birth Driver's	License #		[Attach a photocopy
Previous Address			
Reason for leaving Current Monthly Rent you pay per month \$_ Name of Complex Name of Rental Agent			
Name of Rental Agent		1 ele	ephone #
Employment and Financial Information:			
Please circle all that apply:			
Employment: Full-Time Part-Time Current Employer/Company Name Employer's Address			<u> </u>
Your Direct Supervisor's Name			
Supervisor's Telephone #			
Salary or Rate of Pay per month \$			
f you have recently relocated to this area pemployer:	lease list the name	-	
employer:	olease list the name	-	
	please list the name		

Rental Application Continued

CO-APPLICANT INFORMATION

Name				
Current Residence Address				
City		State	Zip Code	
Mailing Address (if different) _				
Current Home Telephone #	Current Work Telephone #			
Maiden Name (if applicable)			_	
Credit Check Information:				
Social Security Number			[Attach a photocopy	of your card]
Date of Birth	_ Driver's Licer	nse #		[Attach a photocopy]
Previous Address				
If currently renting please con	aplete the follow	wing:		
Date you moved in			te you plan to move out _	
Reason for leaving			• •	
Current Monthly Rent you pay p				
Name of Complex				
Name of Rental Agent				one #
Employment and Financial In	formation:			
Please circle all that apply:				
Employment: Full-Tim	e Part-Time	Self-Employe	ed Student Retired	Unemployed
Current Employer/Company Na	me			
Employer's Address				
Your Direct Supervisor's Name				
Supervisor's Telephone #				
Salary or Rate of Pay per month	\$			
If you have recently relocated to employer:	-		-	
TC // 1.1 // 1.4 C.11				
If retired please provide the follows Parsian Par Month \$				
Your Pension Per Month \$ Your Social Security Per Month		_ Source:		
a om Social Security Per Winnin	. D			

Rental Application Concluded

General Information:		
Please list all other occupants who will be living	with the Applic	ant and/or Co-Applicant:
Name	Age	Relationship
Name		
Name		
Please list your pets by name and breed:		
Signatures: L/Wa haraby apply to losse the above described r	promises for the	tarm indicated above. As an inducement to the
I/We hereby apply to lease the above described powner of the property to accept and approve this true. Should any statement made above be a m deposit will be retained to offset the owner's cost	application, I/v isrepresentation	we warrant that all statements above set forth are n or not a true statement of facts, \$75.00 of the
I/we hereby deposit \$ as ear not accepted and approved within twenty (20) bu waiving any claim for damages by reason of nowner begins the acceptance and approval proreimbursement of the cost of obtaining credit within thirty (30) days from the receipt of a written	isiness banking non acceptance. ocess, \$75.00 coinformation and	days of receipt. The Applicant(s) is(are) hereby If Applicant terminates this application after of the deposit will be retained by owner as a
In the event the owner accepts and approves the executed by all parties, the owner will transfer the required Security Deposit of the Lease Agreement	ne application d	
I/we recognize that as a part of your procedure report may be prepared whereby information is cources.		
** The above information, to the	best of my/our l	knowledge, is true and correct.**
Signature of Applicant		Date signed
Signature of Co-Applicant		Date signed

This is only an Application and not a Lease Agreement