

# APPLICATION TO RENT

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Each Individual Occupant Who is Responsible for Rent Payment  
MUST Complete A Separate Application Form



## PERSONAL INFORMATION

LAST NAME		FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER	
DATE OF BIRTH		DRIVER'S LICENSE NO.		STATE	EMAIL ADDRESS		HOME PHONE NUMBER ( )
1 PRESENT HOME ADDRESS				CITY		STATE	ZIP CODE
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. ( )	
2 PREVIOUS HOME ADDRESS				CITY		STATE	ZIP CODE
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. ( )	
3 NEXT PREVIOUS HOME ADDRESS				CITY		STATE	ZIP CODE
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. ( )	

## PROPOSED OCCUPANT(S)

DESCRIBE EACH & EVERY PERSON WHO WILL OCCUPY THE PREMISES	
WILL YOU HAVE ANY PETS? IF YES, PLEASE DESCRIBE	WILL YOU HAVE ANY LIQUID FILLED FURNITURE? IF YES, DESCRIBE

## EMPLOYMENT/FINANCIAL INFORMATION

Present Occupation		Employer Name	
How long with this Employer	Phone number ( )	Employer address	
Name of your Supervisor	Supervisor Phone number ( )		
Prior Occupation		Employer Name	
How long with this Employer	Phone number ( )	Employer address	
Name of your Supervisor	Supervisor Phone number ( )		
Current Gross Income \$ PER <input type="checkbox"/> Week <input type="checkbox"/> Year <input type="checkbox"/> Month	Name of your Bank	Branch or Address	Account Number <input type="checkbox"/> Checking <input type="checkbox"/> Savings

Please List ALL of your Financial Obligations (If More Creditors Use Additional Sheet of Paper)

Name of Creditor	Address	Phone Number	Monthly Payment Amt.
		( )	
		( )	
		( )	
		( )	
		( )	
		( )	

**EMERGENCY/PERSONAL REFERENCE INFORMATION**

IN CASE OF EMERGENCY, NOTIFY:	ADDRESS	PHONE	RELATIONSHIP
1.			
2.			

MOTHER'S MAIDEN NAME: \_\_\_\_\_

PERSONAL REFERENCES	ADDRESS	PHONE	YEARS KNOWN
1.			
2.			
3.			

**VEHICLE INFORMATION - (Please state exact number of motor vehicle that will be at the premises)**

VEHICLE MAKE	MODEL	YEAR	LICENSE NO.
VEHICLE MAKE	MODEL	YEAR	LICENSE NO.
MOTORCYCLES (OTHER VEHICLES)	MODEL	YEAR	LICENSE NO.

Have you ever filed for bankruptcy? IF YES, DATE FILED: \_\_\_\_\_ Have you ever been convicted of a crime? IF YES, DESCRIBE: \_\_\_\_\_

Have you ever been evicted or asked to move? IF YES, DESCRIBE: \_\_\_\_\_

**APPLICANT AUTHORIZATION**

Applicant represents that all the above statements are true and correct and hereby authorizes landlord/agent to verify the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Landlord/Agent received a payment of \$ \_\_\_\_\_ which will be used to verify Applicant's credit history and other background information. The amount charged is itemized as follows:

- |   |                |
|---|----------------|
| 1. Actual cost of credit report, including any eviction search, and/or other verifying reports: | \$ 20.00 _____ |
| 2. Landlord/Agent cost to process and screen applicant's supplied information:                  | \$ 25.00 _____ |
| 3. TOTAL FEE charged per applicant:   | \$ 45.00 _____ |

The undersigned makes application to rent housing accommodations designated as:

Address of: \_\_\_\_\_ Apt. No. \_\_\_\_\_ City/State \_\_\_\_\_  
 the rental for which is \$ \_\_\_\_\_ per  Month  Week  Other \_\_\_\_\_ and upon approval of this application agrees to sign a rental or lease agreement and to pay all sums due, including required deposits, before occupancy.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

**Form Courtesy of Landlord.com**