

TENANT APPLICATION



PRIMARY APPLICANT

FIRST NAME MI LAST NAME

PRESENT ADDRESS

CITY STATE ZIP CODE

OF YEARS PHONE NUMBER

EMAIL ADDRESS

DATE OF BIRTH SOCIAL SEC #

DRIVERS LICENSE # STATE

PREVIOUS ADDRESS

CITY STATE ZIP CODE

OF YEARS PHONE NUMBER

CO-APPLICANT

FIRST NAME MI LAST NAME

PRESENT ADDRESS

CITY STATE ZIP CODE

OF YEARS PHONE NUMBER

EMAIL ADDRESS

DATE OF BIRTH SOCIAL SEC #

DRIVERS LICENSE # STATE

PREVIOUS ADDRESS

CITY STATE ZIP CODE

OF YEARS PHONE NUMBER



NAME OF NEAREST RELATIVE (OTHER THAN SPOUSE)

PRIMARY APPLICANT

FIRST NAME MI LAST NAME

RELATIONSHIP

ADDRESS

CITY STATE ZIP CODE

CO-APPLICANT

FIRST NAME MI LAST NAME

RELATIONSHIP

ADDRESS

CITY STATE ZIP CODE

ADDITIONAL OCCUPANTS

FIRST NAME MI LAST NAME

DATE OF BIRTH SOCIAL SEC #

FIRST NAME MI LAST NAME

DATE OF BIRTH SOCIAL SEC #

FIRST NAME MI LAST NAME

DATE OF BIRTH SOCIAL SEC #

FIRST NAME MI LAST NAME

DATE OF BIRTH SOCIAL SEC #



EMPLOYMENT HISTORY

PRIMARY APPLICANT

CURRENT EMPLOYER PHONE NUMBER

COMPANY ADDRESS

CITY STATE ZIP CODE

POSITION HELD # OF YEARS

SUPERVISOR MONTHLY GROSS INCOME

PRIOR EMPLOYER

COMPANY ADDRESS

CITY STATE ZIP CODE

POSITION HELD # OF YEARS

SUPERVISOR MONTHLY GROSS INCOME

CO-APPLICANT

CURRENT EMPLOYER PHONE NUMBER

COMPANY ADDRESS

CITY STATE ZIP CODE

POSITION HELD # OF YEARS

SUPERVISOR MONTHLY GROSS INCOME

PRIOR EMPLOYER

COMPANY ADDRESS

CITY STATE ZIP CODE

POSITION HELD # OF YEARS

SUPERVISOR MONTHLY GROSS INCOME



RENTAL HISTORY

PRIMARY APPLICANT

PRESENT LANDLORD PHONE NUMBER

ADDRESS

CITY STATE ZIP CODE

CO-APPLICANT

PRESENT LANDLORD PHONE NUMBER

ADDRESS

CITY STATE ZIP CODE

HAVE YOU OR CO-APPLICANT EVER BEEN EVICTED FROM ANY TENANCY? YES OR NO

IF YES, WAS IT PRIMARY OR CO-APPLICANT? _____

REASON FOR EVICTION? _____

LANDLORD NAME _____ PHONE NUMBER _____

HAVE YOU OR CO-APPLICANT EVER WILLFULLY AND/OR INTENTIONALLY WITHHELD RENT
OR REFUSED TO PAY ANY RENT? YES OR NO

IF YES, WAS IT PRIMARY OR CO-APPLICANT? _____

REASON FOR WITHHOLDING? _____

LANDLORD NAME _____ PHONE NUMBER _____



BANK REFERENCES

CHECKING

BANKING INSTITUTION PHONE NUMBER

ADDRESS

CITY STATE ZIP CODE

ACCT OPEN OR CLOSED

SAVINGS

BANKING INSTITUTION PHONE NUMBER

ADDRESS

CITY STATE ZIP CODE

ACCT OPEN OR CLOSED



AUTHORIZATION TO RELEASE INFORMATION

PRIMARY APPLICANT

MAY WE VERIFY THE ABOVE STATEMENTS
WITH ANY OF THE ABOVE LISTED PERSONS
OR COMPANIES? YES OR NO

MAY WE VERIFY YOUR CREDIT RATING WITH OUR
LOCAL CREDIT BUREAU? YES OR NO

PRIMARY APPLICANT

DATE

CO-APPLICANT

MAY WE VERIFY THE ABOVE STATEMENTS
WITH ANY OF THE ABOVE LISTED PERSONS
OR COMPANIES? YES OR NO

MAY WE VERIFY YOUR CREDIT RATING WITH OUR
LOCAL CREDIT BUREAU? YES OR NO

CO-APPLICANT

DATE

RENTAL PROPERTY ADDRESS OF INTEREST

HOW DID YOU HEAR ABOUT US?
