

(OTHER THAN SPOUSES, USE SEPARATE SHEET FOR EACH TENANT.)

Name \_\_\_\_\_ SSN \_\_\_\_\_ Sex \_\_\_\_\_  
First Middle Last

Date of Birth \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_  
Month Day Year

Name \_\_\_\_\_ SSN \_\_\_\_\_ Sex \_\_\_\_\_  
Spouse First Middle Last

Date of Birth \_\_\_\_\_ Phone(\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_  
Month Day Year

Current Address \_\_\_\_\_  
Apt# Street City State Zip

Landlord or Agent \_\_\_\_\_ Phone \_\_\_\_\_ How long \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Why did you move \_\_\_\_\_

Previous Address \_\_\_\_\_  
Apt# Street City State Zip

Landlord or Agent \_\_\_\_\_ Phone \_\_\_\_\_ How long \_\_\_\_\_

Monthly Rent \_\_\_\_\_ Why did you move \_\_\_\_\_

**Proposed occupants**

\_\_\_\_\_  
First Name Last Name Relationship Age Sex

\_\_\_\_\_  
First Name Last Name Relationship Age Sex

\_\_\_\_\_  
First Name Last Name Relationship Age Sex

\_\_\_\_\_  
First Name Last Name Relationship Age Sex

Pets(?If yes describe) \_\_\_\_\_

**Present Occupation** \_\_\_\_\_ **Prior** \_\_\_\_\_

Employer \_\_\_\_\_

Self-employed, d.b.a \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Type of Business \_\_\_\_\_

Position Held \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

How Long \_\_\_\_\_

Monthly Gross \_\_\_\_\_

**Spouse's**

**Present Occupation** \_\_\_\_\_ **Prior** \_\_\_\_\_

Employer/DBA) \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Position Held \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

How Long \_\_\_\_\_

Monthly Gross \_\_\_\_\_

**Professional References**

_____	_____	_____	_____	_____
Name	City	Phone	Since	occupation
_____	_____	_____	_____	_____
Name	City	Phone	Since	Occupation

**Personal Reference**

_____	_____	_____	_____
Name	Address	Phone	Relationship
_____	_____	_____	_____
Name	Address	Phone	Relationship

**Emergency Contact**

_____	_____	_____	_____
Name	Address	Phone	Relationship

Do you or any member of your household smoke? \_\_\_\_\_

Have you ever filed a petition of bankruptcy? \_\_\_\_\_

Have you ever been evicted from a tenancy or had an eviction notice served you? \_\_\_\_\_

Have you ever willfully and intentionally refused to pay rent when due? \_\_\_\_\_

Have you ever been convicted of a misdemeanor or felony other than traffic or parking violation? \_\_\_\_\_

Are you a current illegal abuser or addict of a controlled substance? \_\_\_\_\_

Have you ever been convicted of the illegal manufacture or distribution of a controlled substance? \_\_\_\_\_

Are you receiving any of the following subsidies; ( ) Public Assistance ( ) Section 8  
 ( ) Other \_\_\_\_\_

**Please include copies of at least one document from each section below, and any voucher and related award documents.**

<b>Income</b>
1. Last four Pay stubs. 2. Bank Statements. 3 W2, 1040 or 1090 form.

<b>Identification</b>
1. Drivers License. 2. Passport. 3. State or Federally Issued picture ID.

<b>Payment History</b>
1. Recent Credit Report. 2. Last 6 months utility, phone cable or credit card bills.

**AUTHORIZATION TO RELEASE INFORMATION**

I the Applicant declared that the foregoing is true and correct, I give full authorization for an investigative report whereby Third parties may be contacted to report on my character, general reputation, personal characteristics, and mode of living, including salary-income, consumer credit, court and criminal history, and banking financial practices. I have the right to make a written request for disclosure of the nature, result and scope of this investigation. I may not, however, receive or view my consumer credit file. I agree to hold the Landlord and the agency used to obtain said information harmless for any claims that may arise as a result of this investigation. I further authorize Banks, Financial Institutions, Landlords, Civil and Criminal Courts, Motor Vehicle Bureaus, Business Associates, Credit Bureaus, Attorneys, Accountants, and other persons or institutions with whom I am acquainted to furnish any and all information regarding me. I am willing that a photocopy or fax of this authorization be accepted with the same authority as this original. I agree to pay a non-refundable screen fee; I further agree that the Landlord may terminate any agreement entered into in reliance on any misstatement made above.

**Applicant** \_\_\_\_\_

**Spouse** \_\_\_\_\_

**Date** \_\_\_\_\_