



**FOR OFFICE USE ONLY:**  
 APT. NO \_\_\_\_\_ APT. TYPE \_\_\_\_\_  
 MONTHLY RENT \_\_\_\_\_ MOVE-IN DATE \_\_\_\_\_  
 SOURCE \_\_\_\_\_ PRO-IN \$ \_\_\_\_\_  
 LEASE DATES \_\_\_\_\_  
 CONCESSION AMT \_\_\_\_\_ FROM \_\_\_\_\_ TO \_\_\_\_\_  
 LEASING CONSULTANT \_\_\_\_\_

**APPLICATION FOR RESIDENCY**

DATE \_\_\_\_\_

EACH APPLICANT 18 YEARS OF AGE OR OLDER MUST SUBMIT A SEPARATE APPLICATION, HOWEVER, MARRIED RESIDENTS MAY SUBMIT A JOINT APPLICATION.

APPLICANT'S NAME \_\_\_\_\_  
 First Middle Last

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

MARITAL STATUS \_\_\_\_\_ DRIVER'S LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_  
 First Middle Last

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_

SPOUSE'S DRIVER'S LICENSE NO. \_\_\_\_\_ STATE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_ CELL PHONE \_\_\_\_\_

OTHER OCCUPANTS:

Name _____	Date of Birth _____	Relationship _____	SS# _____	Name _____	Date of Birth _____	Relationship _____	SS# _____
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Name _____	Date of Birth _____	Relationship _____	SS# _____	Name _____	Date of Birth _____	Relationship _____	SS# _____
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EMERGENCY CONTACT NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ HOME PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

IMPORTANT MEDICAL INFORMATION ABOUT OCCUPANTS IN CASE OF AN EMERGENCY \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_  
 Street Apt. # City State Zip Code Telephone

DATES (MO/YR): FROM \_\_\_\_\_ TO \_\_\_\_\_ MONTHLY PAYMENT \_\_\_\_\_

PRESENT LANDLORD/MANAGER \_\_\_\_\_ TELEPHONE \_\_\_\_\_

RENT OR OWN \_\_\_\_\_ IF HOME, MORTGAGE CO & LOAN # \_\_\_\_\_ REASON FOR MOVING \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_  
 Street Apt. # City State Zip Code Telephone

DATES (MO/YR): FROM \_\_\_\_\_ TO \_\_\_\_\_ MONTHLY PAYMENT \_\_\_\_\_

RENT OR OWN \_\_\_\_\_ IF HOME, MORTGAGE CO & LOAN # \_\_\_\_\_ REASON FOR MOVING \_\_\_\_\_

HAVE YOU AND/OR INTENDED OCCUPANTS EVER BEEN SUED FOR NONPAYMENT OF RENT? \_\_\_\_\_ YES \_\_\_\_\_ NO

BEEN SUED FOR DAMAGE TO RENTAL PROPERTY? \_\_\_\_\_ YES \_\_\_\_\_ NO BROKEN A RENTAL AGREEMENT OR CONTRACT? \_\_\_\_\_ YES \_\_\_\_\_ NO

BEEN EVICTED FROM ANY LEASED PREMISES \_\_\_\_\_ YES \_\_\_\_\_ NO IF YES, EXPLAIN \_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ BUSINESS PHONE NO \_\_\_\_\_

SUPERVISOR \_\_\_\_\_ EMPLOYED SINCE \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ BUSINESS PHONE NO \_\_\_\_\_

SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_

SPOUSE'S EMPLOYER \_\_\_\_\_ POSITION \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ BUSINESS PHONE NO \_\_\_\_\_

SUPERVISOR \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_\_

REASON FOR LEASING HERE \_\_\_\_\_ WERE YOU REFERRED? \_\_\_\_\_ YES \_\_\_\_\_ NO

NAME OF LOCATOR OR RENTAL AGENCY \_\_\_\_\_ NAME OF INDIVIDUAL LOCATOR OR AGENT \_\_\_\_\_

NAME OF FRIEND OR OTHER PERSON \_\_\_\_\_ NAME OF CURRENT RESIDENT AND APARTMENT # \_\_\_\_\_

YEAR & MAKE \_\_\_\_\_ COLOR \_\_\_\_\_ TAG NO & STATE \_\_\_\_\_ REGISTERED TO \_\_\_\_\_

YEAR & MAKE \_\_\_\_\_ COLOR \_\_\_\_\_ TAG NO & STATE \_\_\_\_\_ REGISTERED TO \_\_\_\_\_

ADDITIONAL VEHICLES \_\_\_\_\_

GIVE DESCRIPTION AND TAG NUMBERS OF ANY BOAT, MOTORCYCLE, CAMPER, VAN, ETC. YOU MAY OWN \_\_\_\_\_

CHECKING ACCOUNT NO \_\_\_\_\_ BANK NAME \_\_\_\_\_ AVERAGE BALANCE \_\_\_\_\_ INTEREST RATE \_\_\_\_\_

SAVINGS ACCOUNT NO \_\_\_\_\_ BANK NAME \_\_\_\_\_ AVERAGE BALANCE \_\_\_\_\_ INTEREST RATE \_\_\_\_\_

