

APARTMENT / LEASE APPLICATION

Neatly complete all information below. All other applicants over the age of 18 must complete and sign their own application.

Primary Applicant _____ Cell Phone # _____ Home # _____

Drivers License # _____ State _____ Exp. _____ DOB _____

Social Security # _____ Email address _____

Current Address _____ City _____ State _____ Zip _____

Current Landlords Name _____ Phone # _____

How long at this address _____ Years/months Reason for leaving _____ Rent \$ _____

Previous Address _____ City _____ State _____ Zip _____

Previous Landlords name _____ Phone # _____

How long at this address _____ Years/months Reason for leaving _____ Rent \$ _____

Auto Yr _____ Make _____ Model _____ State/License plate # _____

Present Employer _____ Position _____ Phone # _____

Employers Address _____ City _____ State _____ Zip _____

How long at this job _____ Monthly Income _____ Other income sources _____

Co-applicant _____ Cell Phone # _____ Home # _____

Drivers License # _____ State _____ Exp. _____ DOB _____

Social Security # _____ Email address _____

Present Employer _____ Position _____ Phone # _____

Employers Address _____ City _____ State _____ Zip _____

How long at this job _____ Monthly Income _____ Other income sources _____

No Pets Allowed -0- Have any listed applicants EVER been party to an eviction? [] Yes [] No

Total number of adults _____ Total number of children living with you under the age of 18 _____

Names and relations of all other applicants _____

Contact person in case of emergency _____

Have any listed applicants EVER been convicted of a Felony? [] Yes [] No If yes, explain _____

Have you ever filed bankruptcy? [] Yes [] No If yes, explain _____

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision. I understand that the landlord may terminate any rental agreement entered into for any misrepresentation made above.

Signature _____ Date _____

Signature _____ Date _____

****Received from applicants the non-refundable sum of \$25.00 dollars to pay for tenant screening services from A.B.A.****
*****Please attach copies of previous two period pay stubs*****