RENTAL APPLICATION

No Cash Accepted

FOR OFFICE USE ONLY											
Type of apartment desired:		Apt. Address									
ST 1BR 2BR 2BR/2BA				Sec. Dep. \$ Amt. Rec'd \$ Date							
				Base Rent \$ Additions \$							
Date Desired Traffic source AM / PM AM / PM				Move-In Date Lease Dates Date Approved / Refused / Cancelled							
Applicant's full name Date of Birth Social Security #											
Applicant 3 full hame	name			Date of Birth Social S			security "				
Marital Status:	☐ Single	☐ Married		☐ Widowed		dowed			eparated / Divorced		
Phone# Cell Phone#							Email				
Co-applicant Name							al Security #				
Phone# Cell Phone#				Ema			ail				
Other Occupants-Name				Date of Birth Relat			ionship				
Name							Relationship				
Name				Date of Birth		Relation	ship				
*Pet type	*Pet type Breed / Age				Weigh	t]	How many?			
*Size and breed restrictions apply. See Pet Addendum. RESIDENTIAL HISTORY (Please use separate sheet of paper if necessary)											
Present - Street address											
City State											
Apartment Name/Mortgage											
City, State, Zip				Phone # Move-I			Move-In D	ate	Move-Out Date		
Monthly Payment \$											
Previous - Street address											
City				tate Zip							
Apartment Name/Mortgage		Street Address									
City, State, Zip				Phone #			Move-In D	ate	Move-Out Date		
Monthly Payment \$		Reason for Moving									
Have you ever been threater	ned with an e	viction or been evicted fr	om anv	leased premis	ses? (Y /]	N) If yes.	please expl	lain.			
Have you ever been threatened with an eviction or been evicted from any leased premises? (Y / N) If yes, please explain.											
Have you ever received a notice to leave the rental property or a 3-day notice to leave? (Y / N) If yes, please explain.											
Have you ever been convicted of a crime other than a minor traffic offense: (Y / N) If yes, please explain:											
		EMER	GEN	CY CONT.	ACTS						
In case of emergency, contact:							Relationship				
Address:				City/State:			ZIP:				
Phone#	<u> </u>	1			Email						
Second emergency contact:	Relationship										
Address:				City/State:			ZIP:				
Phone# Cell Phone#				<u> </u>			Email				

EMPLOYMENT HISTORY

		EMPLOIM	ieni moi	UKI			
Present Employer				Position			
Business Address			Phone #	Phone #			
Supervisor	Emplo	yed from	То	Approx Ne	Net Monthly Income \$		
Previous Employer				Position	Position		
Business Address		Phone #	Phone #				
Supervisor	yed from	То	Approx Net Monthly Income \$				
OTHER INCOM	// //IE-(Secondary En	aployment, Food S	Stamps, Disa	bility, Social Securit	y, Child Support, Alimony)		
Source:	(2 **********************************	- F 5	F ~,~	• .	aly Amount:		
Source:		Net Monthly Amount:					
Source:			Net Month	aly Amount:			
		WELLICI E I		FION			
Total Number of Vehicles to b	be parked at residency	VEHICLE 1	NFORMA	HON			
1 - Year					License Tag #		
Registered to:		Take Model					
2 - Year	Color	Make/Model			License Tag #		
Registered to:	Color	With Color Wilder			Electise Tag "		
Registered to.							
statements, misrepresentations, in action if later discovered to be fals. 2. By signing the applica	accurate information or se, misrepresented, inaccution, you are authorizing atthorizes Management and	failure to supply the dat curate or incomplete info g the use of any credit re ad the credit reporting/sc	a requested above primation. porting/screening	re may serve as a rejection g agencies to verify credit,	application in a timely manner. Any fa of your application or grounds for an evict validate accuracy of all information record formation and access your credit report in		
application fee, on the premises li will be retained by Management	isted above. Payments if this application is apsing of this application	must be made by M proved and I am unabland holding the specific	oney Order of the to fulfill the	r Check. No Cash Accorditions of occupancy.	as a non-refunda repted. I understand that the security dep I acknowledge that the Landlord will sui e returned if this application is not approv		
approval of this application, and e	execution of a lease agree	ement.			on provided on this application shall surv		
5. I understand that occumy apartment.	pancy of the apartment	is limited to persons ide	entified on this a	greement. I remain respon	sible for all occupants, guests and invitee		
6. I agree to submit to Le	essor valid photo identifi	cation (such as a state di	river's license).				
	es and mode of living. The	he nature and scope of the	he investigation	requested may include info	clude information as to my character, generation obtained through personal intervie e of living.		
The term "Lessor" shall include the	he Owner-Landlord and	Central Management Co	ompany as mana	ging agent and any affiliate	, agent or employee thereof.		
Signature Applicant			S	gnature Authorized Age	ent		
Date REV. 08/23/11			Ī	Date	© Central Management Company		

