

RENTAL APPLICATION

A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER.

Applicant is completing Application as a (check one) tenant tenant with co-tenant(s) or guarantor/co-signor.

Total number of applicants _____

Property Information	Address:	Unit #:	City/State:	Zip Code:
	Rental Amount Per Month:	Deposit Amount:	Proposed move-in date:	

APPLICANT	Name: (First, M.I., Last)			Date of Birth:		Age:	
	Home Phone:			Work Phone:		Pager:	
	Cell Phone:			E-Mail Address:			
	SOCIAL SECURITY NUMBER	PRINT SOCIAL SECURITY NUMBER CLEARLY			Drivers License #:	State:	Expires
					Car Make	Model	Year
	Employer				Vehicle License #	State	Car Color
	Work Address:					Employee ID #	
	Supervisors Name:			Sup. Phone #:		How Long Employed ____yrs ____mo.	
	Monthly Salary:			Job Title or Rank:		Smoker: YES NO	
	Pet(s) or service animals (number and type)				Does applicant plan to use liquid-filled furniture? No Yes		

CURRENT ADDRESS	Current Address.			Unit #	City State	Zip Code
	From month/year	To: month/year	Landlord Name	Landlord Phone #	Rent Paid \$	
	Reason For Leaving:			30 Day Notice Given	YES NO	Date Notice Given

PREVIOUS ADDRESS	Previous Address.			Unit #	City State	Zip Code
	From month/year	To: month/year	Landlord Name	Landlord Phone #	Rent Paid \$	
	Reason For Leaving:			30 Day Notice Given	YES NO	Date Notice Given

GUARANTOR/CO-SIGNOR	Name: (First, M.I., Last)			Date of Birth:		Age:	
	Home Phone:			Work Phone:		Pager:	
	Cell Phone:			E-Mail Address:			
	SOCIAL SECURITY NUMBER	PRINT SOCIAL SECURITY NUMBER CLEARLY			Drivers License #:	State:	Expires
					Car Make	Model	Year
	Employer				Vehicle License #	State	Car Color
	Work Address:					Employee ID #	
	Supervisors Name:			Sup. Phone #:		How Long Employed ____yrs ____mo.	
	Monthly Salary:			Job Title or Rank:			
	HAVE YOU EVER HAD OR BEEN A PARTY TO ANY OF THE FOLLOWING				<input type="checkbox"/> Unlawful Detainer	<input type="checkbox"/> 3 Day Notice to Pay	<input type="checkbox"/> Collection Accounts

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PROPOSED OCCUPANTS		FULL NAMES (First, M.I., Last)	AGE	RELATIONSHIP	SOCIAL SECURITY #
	1				
	2				
	3				
	4				
	5				

CREDIT INFORMATION		Name of creditor	Account number	Monthly payment	Balance due
	1				
	2				
	3				
		Name of bank/branch	Account number	Type of account	Account balance
	1				
	2				

REFERENCES	Full Name:	Relationship:	Phone Number:

Emergency Contacts	Full Name:	Relationship:	Phone Number:

CREDIT	Please explain any derogatory credit from front side:

SIGNATURES	Authorization to Release Information & Perform Tenant Screening	
	<p>A photo static copy of my driver's license or picture id card, social security card, latest pay check stub(s) and last year's w-2 (s) or copy of last years income tax return are attached to the application (), or will be provided ().</p> <p>Applicant understands and agrees: (i) this is an application to rent only and does not guarantee that applicant will be offered the Premises; and (ii) landlord or Manager or Agent may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant.</p> <p>The information on this application is true and correct to the best of my knowledge. However, should any statement made above be a misrepresentation or not a true statement of fact. Applicant agrees to pay a charge set by agent to offset the agent's cost, time, and effort in processing my application. I hereby authorize George Harb and/or their agents to verify the above information and obtain either a consumer or investigative credit report or any other type report they deem necessary. I authorize any and all grantors of credit or previous and current landlords to release any or all information. If we rent or lease said property we further authorize any future credit reports that owner or agent deem necessary.</p>	
	APPLICANT:	DATE:
	CO-APPLICANT:	DATE:
GUARARANTOR/CO-SIGNER: As guararantor / co-signer agree I to be responsible for rent, damages and/or cleaning of unit for above named applicants,	DATE:	

If you have any questions, Call George Harb at 619-286-6666