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) \square tenant \square tenant with co-tenant(s) or \square 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: Date of Birth: Age: (First, M.I, Last) Home Phone: Work Phone: Pager: Cell Phone: E-Mail Address: **Drivers** SOCIAL PRINT SOCIAL SECURITY NUMBER CLEARLY State: **Expires** License #: **SECURITY** Car NUMBER Model Year APPLICANT Make **Vehicle** Car Employer State License # Color Employee ID # Work Address: 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 HAVE YOU EVER HAD OR BEEN A Unlawful Detainer ☐ 3 Day Notice to Pay Collection Accounts PARTY TO ANY OF THE If any of the boxes are checked **FOLLOWING** ☐ 30/60 Day Late ☐ Bankruptcy please explain back side: City Zip Current Address. Unit# CURRENT ADDRESS State Landlord Landlord Rent From To. month/year Name Phone # Paid \$ Date 30 Day Notice Given YES NO Reason For Leaving: Notice Given City Zip PREVIOUS ADDRESS Previous Address. Unit# State Code Landlord Landlord Rent From To month/year month/year Name Phone # Paid \$ Date 30 Day Notice Given Reason For Leaving: YES NO Notice Given Name: Date of Birth: Age: (First, M.I, Last) Home Phone: Work Phone: Pager: Cell Phone: E-Mail Address: **GUARANTOR/CO-SIGNOR** City Zip Unit# Current Address. State Code Drivers PRINT SOCIAL SECURITY NUMBER CLEARLY **Expires** SOCIAL State: License #: SECURITY Car NUMBER Model Year Make Vehicle Car Employer State icense # Color Work Address: Employee ID # Supervisors Name: Sup. Phone #: How Long Employed yrs Monthly Salary: Job Title or Rank: HAVE YOU EVER HAD OR BEEN A Unlawful Detainer ☐ 3 Day Notice to Pay Collection Accounts PARTY TO ANY OF THE If any of the boxes are checked **FOLLOWING** ☐ 30/60 Day Late Bankruptcy please explain back side:

UPANTS		FULL NAMES (First, M.I, Last)		AGE		RELATIONSHIP		SOCIAL SECURITY #
	1							
000	3							
PROPOSED OCCUPANTS	4							
	5							
CREDIT INFORMATION		Name of creditor Account n		ınt numbe	number Monthly pa		nt	Balance due
	1							
	2							
	3	3						
		Name of bank/branch Account no		ınt numbe	per Type of accou		nt	Account balance
	1							
	2							
REFERENCES		Full Name:			Relationship:			Phone Number:
<u>~</u>								
Emergency Contacts	Full Name:			Relationship:			Phone Number:	
ш								
	Please explain any derogatory credit from front side:							
CREDIT								
SIGNATURES	Authorization to Release Information & Perform Tenant Screening 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, and/or 3 months past Banking statements, or will be provided (). 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. 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 as well as CREDITS/DEBITS from my bank accounts.							
	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:	