



## RENTAL APPLICATION

TO BE COMPLETED BY EACH APPLICANT 18 YEARS OF  
AGE & OLDER. CO-APPLICANTS MUST USE OWN APPLICATION.



### PROPERTY INFORMATION

Property Address ("Property"):

[Address]

[City]

[State]

[Zip]

Anticipated Move-in Date: \_\_\_\_\_ Anticipated Monthly Rent: \$ \_\_\_\_\_

Rental Application Fee? ☐ Yes ☐ No \$ \_\_\_\_\_

\* The Applicant is strongly encouraged to view the Property prior to submitting an application. Landlord makes no representations or warranties (express or implied) concerning the physical condition of the Property or use for Applicant's intended purpose. Absent a written agreement to the contrary, the Landlord shall not be obligated to make any repairs or alterations to the Property. Rental application fees are non-refundable.

### APPLICANT INFORMATION

Applicant Name: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Other Contact Information (if any): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver License # & State: \_\_\_\_\_

SS# (only if credit check required): \_\_\_\_\_

Co-applicant? ☐ Yes ☐ No *If yes, the co-applicant must submit a separate application.*

Active military? ☐ Yes ☐ No *If yes, is there an order limiting leases to 1 year?* ☐ Yes ☐ No

Emergency Contact (Name & Address) : \_\_\_\_\_

Names of others who will occupy the Property:

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

### RENTAL HISTORY



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### Current Residence

Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
From: \_\_\_\_\_ to Present  
Rent: \$ \_\_\_\_\_ per month  
Landlord Name: \_\_\_\_\_  
Landlord Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Previous Residence

Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
From: \_\_\_\_\_ to \_\_\_\_\_  
Rent: \$ \_\_\_\_\_ per month  
Landlord Name: \_\_\_\_\_  
Landlord Phone: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Check one for each of the following:

Yes   No

- |                          |                          |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever been evicted or asked to move out by a landlord?                 |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you ever violated a rental agreement?                                     |
| <input type="checkbox"/> | <input type="checkbox"/> | Does anyone who will occupy the Property smoke (including e-cigarettes)?       |
| <input type="checkbox"/> | <input type="checkbox"/> | Have you been convicted or pleaded no contest to a felony in the last 7 years? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are you a registered sex offender? If yes, explain below.                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Is there additional information you want considered? If yes, explain below.    |

Additional comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## EMPLOYMENT HISTORY

### Current Employer

Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
From: \_\_\_\_\_ to Present  
Gross Pay: \$ \_\_\_\_\_ per month  
Manager Name: \_\_\_\_\_  
Manager Phone: \_\_\_\_\_  
Additional income to consider: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Previous Employer

Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
From: \_\_\_\_\_ to \_\_\_\_\_  
Gross Pay: \$ \_\_\_\_\_ per month  
Manager Name: \_\_\_\_\_  
Manager Phone: \_\_\_\_\_



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### REFERENCES

Reference #1 Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: ☐ Personal ☐ Professional Length of acquaintance: \_\_\_\_\_

Reference #2 Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Relationship: ☐ Personal ☐ Professional Length of acquaintance: \_\_\_\_\_

### MISCELLANEOUS

**Authority.** Applicant hereby authorizes Landlord and Landlord's agents to (i) obtain a copy of any credit report Landlord deems necessary, (ii) obtain a criminal background related to Applicant and any occupant, (iii) verify any rental or employment history and other information related to the application with persons knowledgeable about such information, (iv) contact any reference provided by Applicant, and (v) otherwise verify information provided by Applicant.

**Application.** Applicant acknowledges that completion and delivery of this application to the Landlord does not constitute an agreement or commitment to lease the Property to Applicant. The Property remains on the rental market and Landlord reserves the right to market to prospective tenants (including accepting other offers to lease the Property) until Landlord and Applicant have fully executed a lease for the Property.

**Accuracy.** Applicant represents and warrants that the above information is true and correct. Applicant hereby authorizes Landlord and Landlord's agents to (i) verify the information provided herein, (ii) obtain consumer credit reports, and (iii) contact any reference provided by Applicant.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

#### FOR LANDLORD'S USE

Date Application Received: \_\_\_\_\_ Application: ☐ Approved ☐ Denied

If denied, the reason being: \_\_\_\_\_  
\_\_\_\_\_





**AUTHORIZATION TO RELEASE  
INFORMATION FOR RENTAL APPLICATION**



**TO:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**RE: Rental Application of:**

**Name of Applicant:** \_\_\_\_\_

**Address of Applicant:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

I, the undersigned, in response to a certain Rental Application submitted to \_\_\_\_\_, whose address is \_\_\_\_\_  
("Landlord") for purposes of applying to lease property located at \_\_\_\_\_  
\_\_\_\_\_ (the "Property"), hereby authorize Landlord  
and give permission to:

1. speak with any reference submitted on my Application;
2. obtain a copy of my credit report;
3. speak with current and former landlords concerning my rental history;
4. obtain a copy of my criminal history; and
5. speak with any employer regarding my employment and income history.

I hereby authorize you to disclose any of this information as may be in your possession to the above-described requestor without liability for such disclosure. I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct, that I am the person named in this Authorization to Release.

**NOTE: A COPY OF THIS SIGNED AUTHORIZATION SHALL BE AS EFFECTIVE AS THE ORIGINAL.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

This form is made available for Landlord Legal Plan Members only. Unauthorized use, duplication or alteration of this form or any portion thereof is strictly prohibited.