

# Apartment Application Agreement

Date \_\_\_\_\_

Apartment Address: \_\_\_\_\_ Apt# \_\_\_\_\_ Date Apt needed: \_\_\_\_\_

How did you select the apartment: Sign \_\_\_\_\_ Newspaper \_\_\_\_\_ Referral \_\_\_\_\_ Other \_\_\_\_\_

Phone/Cell number \_\_\_\_\_ Email \_\_\_\_\_

## Personal Information

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

Spouse: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SS# \_\_\_\_\_

Number of children or additional residents \_\_\_\_\_ Name(s) and Age(s): \_\_\_\_\_

Others: \_\_\_\_\_

## Resident(s) History – Previous 5 years required

Current Address/City/State/Zip \_\_\_\_\_

\_\_\_\_\_ Rent \_\_\_\_\_ Do you have a lease? \_\_\_\_\_

Have you given notice? \_\_\_\_\_ Occupied from: \_\_\_\_\_ To: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Previous Address/City/State \_\_\_\_\_

Occupied from: \_\_\_\_\_ To: \_\_\_\_\_ Landlord \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Previous Address/City/State \_\_\_\_\_

Occupied from: \_\_\_\_\_ To: \_\_\_\_\_ Landlord \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Have you ever been evicted? \_\_\_\_\_ If yes, reason: \_\_\_\_\_

Have you ever filed for bankruptcy? \_\_\_\_\_ If yes, reason: \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_ If yes, reason: \_\_\_\_\_

Are you a smoker? \_\_\_\_\_ Are you aware that this is a smoke free and pet free building? \_\_\_\_\_

## Employment Information & Other Income sources for the next six months

Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

How long: \_\_\_\_\_ Position \_\_\_\_\_ Wages/Month \_\_\_\_\_ Supervisor \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

How long: \_\_\_\_\_ Position \_\_\_\_\_ Wages/Month \_\_\_\_\_ Supervisor \_\_\_\_\_

Additional Sources of income: \_\_\_\_\_ Amount \_\_\_\_\_

**References – no relatives, please**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

**Other Information**

In case of emergency notify \_\_\_\_\_ Relationship \_\_\_\_\_

Address/City/State \_\_\_\_\_ Phone \_\_\_\_\_

Vehicles: Year: \_\_\_\_\_ Type/Model \_\_\_\_\_ Color \_\_\_\_\_ License#/State \_\_\_\_\_

Year: \_\_\_\_\_ Type/Model \_\_\_\_\_ Color \_\_\_\_\_ License#/State \_\_\_\_\_

Name of your bank \_\_\_\_\_ City/Branch \_\_\_\_\_

This application is considered part of your lease. Under the privacy act, the applicant may choose to withhold some of the information above. However, it is requested that you release this information for purposes of evaluation. The foregoing information is true and correct in all respects and I authorize verifications of all tenant history, employment references, and a credit check, if required by management. I fully understand that his application is taken subject to approval of the Management and Owner, and is subject to the apartment being available. If I am not accepted by Management, the deposit paid will be **refunded minus \$30.00** for credit check. If my application is accepted, it is understood that I am responsible **for a minimum of one year of rental** after I move in, regardless if I sign a lease. Management need not supply specific reason for denial, and is released from any liability associated with the same. If I decide not to take the apartment before signing a lease, **the entire deposit will be forfeited.**

Under statutory law, providing false information on this application may be deemed good cause for termination of the lease by Management. I certify that no pets will be on the premises.

**APPLICATION FEE OF \$30.00 MUST BE SUBMITTED WITH FORM AND IS NONREFUNDABLE.**

**SIGNATURES:**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE:**

Rent Commences: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Move In Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Monthly Rent\$ \_\_\_\_\_

Utilities included (circle): Heat Water Lights Garbage Cable

Lease Term: \_\_\_\_\_ months Start Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ End Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Deposit: \$ \_\_\_\_\_ Received date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Deposit Paid: \$ \_\_\_\_\_

Rent paid \$: \_\_\_\_\_

Application: Approved \_\_\_\_\_ Rejected \_\_\_\_\_ By \_\_\_\_\_ Date: \_\_\_\_\_

Reason to be stated on separate form, if applicable:

Applicant Contacted: Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ By \_\_\_\_\_