



LEASE APPLICATION • \$30 Non-refundable Fee per Applicant

COMMUNITY NAME _____ LEASING CONSULTANT _____

APPLICANT #1

Resident Co-signer

Name: _____ Date of Birth: _____ Social Security: _____

Address: _____ City: _____

Home phone: _____ Cell phone: _____ Email: _____

APPLICANT #2

Resident Co-signer

Name: _____ Date of Birth: _____ Social Security: _____

Address: _____ City: _____

Home phone: _____ Cell phone: _____ Email: _____

List all other occupants including children. (All occupants ages 18 years or older must be listed as a Resident and must sign the application)

1. Name: _____ Date of Birth: _____ 3. Name: _____ Date of Birth: _____

2. Name: _____ Date of Birth: _____ 4. Name: _____ Date of Birth: _____

EMPLOYMENT INFORMATION

Employer: _____ Address: _____ How Long? _____

Supervisors Name: _____ Phone # _____ Monthly Salary \$ _____

Previous Employer: _____ Address: _____ How Long? _____

Supervisors Name: _____ Phone # _____ Monthly Salary \$ _____

Any additional income: _____



PET INFORMATION

Do you have a pet? yes No

Pet Type: _____ Breed: _____ Weight: _____ Name: _____ Color: _____

Pet Type: _____ Breed: _____ Weight: _____ Name: _____ Color: _____

CERTIFICATION OF CORRECT INFORMATION: Applicant certifies that all information provided in this application is correct. If a lease is entered into and the landlord subsequently learns the incorrect information was given or pertinent information was omitted, the lease may be terminated at the landlord's option. If you are applying to lease an apartment with other persona, you certify that you have read his or her or their application and they are correct to your knowledge.

VERIFICATION AUTHORIZATION: Applicant authorizes the apartment community to investigate his or her credit, employment, housing, and/or criminal history, and any other information, and to report to others such information and credit experience with the apartment community.

APPLICATION FEE: The Application Fee is a non-refundable processing fee. If applicant and any co-applicants are not approved to enter into a lease for the type apartment requested and all information is true on the application.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

Property Manager Signature: _____ Date: _____

Apt. # _____ Monthly Rent:\$ _____ Move in Date: _____ Monthly Fees: _____

Lease Term:s _____