

Rental Application for Residents and Occupants

*Each co-applicant and each occupant 18 years old and over must submit a separate application.
Spouses may submit a single application.*



Date when filled out: _____

<p>ABOUT YOU Full name (exactly as on driver's license or govt. ID card) _____</p> <p>Your street address (as shown on your driver's license or government ID card): _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Former last names (maiden and married): _____</p> <p>Your Social Security #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____ Hair color: _____</p> <p>Marital Status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> divorced <input type="checkbox"/> widowed <input type="checkbox"/> separated</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you or any occupant smoke? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>Will you or any occupant have an animal? <input type="checkbox"/> yes <input type="checkbox"/> no</p> <p>Kind, weight, breed, age: _____</p> <hr/> <p>Current home address (where you now live): _____</p> <p>City/State/Zip: _____</p> <p>Home/cell phone: (____) _____ Current rent: \$ _____</p> <p>Email address: _____</p> <p>Name of apartment where you now live: _____</p> <p>Current owner or manager's name: _____</p> <p>Their phone: _____ Date moved in: _____</p> <p>Why are you leaving your current residence? _____</p> <hr/> <p>Your previous home address: _____</p> <p>City/State/Zip: _____</p> <p>Apartment name: _____</p> <p>Name of above owner or manager: _____</p> <p>Their phone: _____ Previous monthly rent: \$ _____</p> <p>Date you moved in: _____ Date you moved out: _____</p> <hr/> <p>YOUR WORK Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Your gross annual income is over: \$ _____</p> <p>Date you began this job: _____</p> <p>Supervisor's name and phone: _____</p> <hr/> <p>Previous employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Gross annual income was over: \$ _____</p> <p>Dates you began and ended this job: _____</p> <p>Previous supervisor's name and phone: _____</p> <hr/> <p>YOUR CREDIT HISTORY Your bank's name, city, state: _____</p> <p>List major credit cards: _____</p> <p>Other non-work income you want considered. Please explain: _____</p> <p>Past credit problems you want to explain. (Use separate page.) _____</p> <hr/> <p>WHY YOU APPLIED HERE Were you referred? <input type="checkbox"/> Yes <input type="checkbox"/> No.</p> <p>If yes, by whom: _____</p> <p>Name of locator or rental agency: _____</p> <p>Name of individual locator or agent: _____</p> <p>Name of friend or other person: _____</p> <p>Did you find us on your own? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, fill in information below:</p> <p><input type="checkbox"/> On the Internet <input type="checkbox"/> Stopped by <input type="checkbox"/> Newspaper (name): _____</p> <p><input type="checkbox"/> Rental publication: _____</p> <p><input type="checkbox"/> Other: _____</p>	<p>YOUR RENTAL/CRIMINAL HISTORY Check only if applicable. Have you, your spouse, or any occupant listed in this Application ever: <input type="checkbox"/> been evicted or asked to move out? <input type="checkbox"/> moved out of a dwelling before the end of the lease term without the owner's consent? <input type="checkbox"/> declared bankruptcy? <input type="checkbox"/> been sued for rent? <input type="checkbox"/> been sued for property damage? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion? <input type="checkbox"/> been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision You represent the answer is "no" to any item not checked above. _____</p> <hr/> <p>YOUR SPOUSE Full name: _____</p> <p>Former last names (maiden and married): _____</p> <p>Spouse's Social Security #: _____</p> <p>Driver's license # and state: _____ OR govt. photo ID card #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____ Hair color: _____</p> <p>Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Date began job: _____ Gross annual income is over: \$ _____</p> <p>Supervisor's name and phone: _____</p> <hr/> <p>OTHER OCCUPANTS Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Continue on separate page if more than three.</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or govt. ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <hr/> <p>YOUR VEHICLES List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p> <p>Make and color of vehicle: _____</p> <p>Year: _____ License #: _____ State: _____</p> <hr/> <p>EMERGENCY Emergency contact person over 18, who will not be living with you:</p> <p>Name: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____ Home phone: (____) _____</p> <p>Relationship: _____</p> <hr/> <p>AUTHORIZATION I or we authorize (owner's name) _____</p> <p>Arbors of Brookdale</p> <p>to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.</p> <p>Applicant's signature _____</p> <p>Spouse's signature _____</p> <p style="text-align: center;"><i>Applicant must also sign on the next page of this Application.</i></p>
---	--