



APPLICATION FOR TENANCY AND AGREEMENT FOR OCCUPANCY

Apartment Community: _____

Address of Apartment Applied for: _____

Desired Date of Occupancy: _____

PERSONAL INFORMATION

Applicant's Full Name: _____

Date of Birth: _____ Age: _____ Marital Status: _____

Social Security #: _____ Driver's License #: _____ State: _____

Spouse Full Name: _____

Date of Birth: _____ Age: _____ Marital Status: _____

Social Security #: _____ Driver's License #: _____ State: _____

Other Residents	Relationship	Social Security #	Date of Birth

Pet: _____ Type: _____ Weight: _____

(*Weight not to exceed 25 lbs fully grown)

RESIDENCE HISTORY

Present Address: _____

City: _____ State: _____ Zip: _____

Present Telephone#: _____ Length of Time at Present Address: _____

Present Landlord or Mortgage Holder: _____ Telephone#: _____

Amount of Rent: _____ Lease Term: _____ Lease End Date: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

Previous Landlord or Mortgage Holder: _____ Telephone#: _____

Amount of Rent: _____ Lease Term: _____ Lease End Date: _____

Length of Time at Previous Address: _____

EMPLOYMENT INFORMATION

Applicant Employed By: _____ How Long? _____

Employer's Address: _____ Phone: _____

Position Held: _____

Salary (Monthly): _____ Supervisor: _____

Previously Employed By: _____ How Long? _____

Employer's Address: _____ Phone: _____

Position Held: _____

Salary (Monthly): _____ Supervisor: _____

SPOUSE'S EMPLOYMENT INFORMATION

Spouse Employed By: _____ How Long? _____
 Employer's Address: _____ Phone: _____
 Position Held: _____
 Salary (Monthly): _____ Supervisor: _____

BANKING & PERSONAL REFERENCES

Bank: _____ Branch: _____
 Checking Account #: _____ Savings Account #: _____

Reference: _____ Relationship: _____
 Address: _____ Phone: _____

Reference: _____ Relationship: _____
 Address: _____ Phone: _____

Number of Automobiles

Make _____ Model _____ Year _____ Color _____ License No. _____ State _____
 Make _____ Model _____ Year _____ Color _____ License No. _____ State _____

In Case of Emergency, Notify: _____ Relationship: _____
 Address _____ City _____ State _____ Zip _____
 Telephone Number: (home) _____ (work) _____

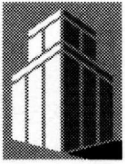
There shall be a late charge of \$30.00 for rent not received in full by the end of the fifth day of each month which is five (5) days from your rent due date. There will be an additional charge of \$25.00 for each returned check to us. I acknowledge I have applied for the rental of the above described premises from Kohner Properties, Inc. (subject to owner's approval) upon the express representation that I have no pets, children or other adults not stated in the above application. The tenant further agrees that any breach of this agreement and representation or if the tenant shall fail to pay the rent promptly, shall entitle Kohner Properties, Inc. to take immediate legal action for rent and possession of the premises. This application may be rejected and the deposit refunded without reason. **ONCE THIS APPLICATION HAS BEEN APPROVED, YOUR DEPOSIT BECOMES NON-REFUNDABLE AND YOU WILL BE HELD RESPONSIBLE FOR ALL UNPAID BALANCES IF THE APPLICATION DEFAULTS.** Lessee agrees all security deposits and unearned rent are deposited, as they are collected into the Kohner Properties Management Trust Account. These monies are then given to, and become the responsibility of the property owner. By signing this form you are authorizing Kohner Properties, Inc. and _____ to run a credit check, verify rental history and employment.

Signature of Applicant: _____
 Signature of Co-Applicant (Spouse): _____
 Signature of Manager/Agent: _____

	CK/MO NO.
First Months Rent: _____	_____
Non-Refundable Application Fee: _____	_____
Pet Deposit (Requires Pet Agreement): _____	_____
Security Deposit: _____	_____
Total Charges and Deposits: _____	
Less Advance Payments Received: < _____ >	
Balance to be paid prior to move-in: <input type="text"/>	

(Total monies must be paid in personal check, cashiers check or money order)





KOHNER
 PROPERTIES
 INCORPORATED

INCOME/EMPLOYMENT VERIFICATION

Employer: _____ Complex: _____

Address: _____

Phone/Fax: _____

RE: _____ S.S. #: _____

Dear Employer:

The person named above has applied to lease an apartment at _____. In order to establish eligibility for occupancy, we are required to verify their employment. Please complete this form and return to us at the above address or fax number. Thank you for your cooperation in this matter. This information will be held in the strictest confidence and used only as legally necessary.

Employed from: _____ to _____

Occupation: _____

Employment is: Permanent Temporary Seasonal

Base pay \$ _____ per Hour Week Month

Average number of hours worked per week _____

 Signature/Title of Employer

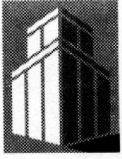
 Date

----- Authorization -----

I, _____ give authorization to you to release any information concerning my employment/income.

 Employee Signature

 Date



KOHNER
 PROPERTIES
 INCORPORATED

RENTAL VERIFICATION

_____, who currently/previously lives at _____ has applied for any apartment at _____.

Please fill out the following information and return to us via fax to _____, or by mail to _____.

Thank you in advance for your cooperation.

Move-In date _____ Lease Expiration date _____

Rental amount _____ Paid as agreed? Yes No

Was Resident late? Yes No How many times? _____

Would you renew a lease with them? Yes No

Was proper thirty (30) day notice given? Yes No

Additional comments: _____

 Name/Title _____ Date _____

KOHNER PROPERTIES, INC.

Authorized Agent

I, _____ give authorization to you to release any information concerning my residency.

