

THE RIDGE AT ROCKRIMMON
 5965 Nora Point, Colorado Springs, CO 80919
 (719) 532-0200

Applicant's Full Name: _____

Social Security #: _____ Birth Date: _____

Co-Applicant's Full Name: _____

Social Security #: _____ Birth Date: _____

Additional Occupants Name and Birth Date: _____

DO YOU HAVE A PET? _____ CAT _____ DOG _____

TO BE COMPLETED BY MGMT.

AGENT: _____
 DATE: _____
 UNIT: _____
 RENT: _____
 W/D: _____
 PARKING: _____
 MI DATE: _____
 DEPOSIT: _____
 PET DEPOSIT: _____
 PET FEE: _____
 PET TYPE: _____
 TERM: _____
 REFERRED BY: _____

RESIDENCY INFORMATION:

Current Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Date Moved In? _____ Rental Amount: _____ Reason for Move: _____

Landlord/Mortgage Company: _____ Phone: _____

Type of Residence: Apartment _____ Condo Owner _____ House Owner _____ House Rental: _____

Previous Address: _____ City: _____ State: _____ Zip: _____

How Long? _____ Rental Amount: _____ Reason for Move: _____

Previous Landlord: _____ Phone: _____

EMPLOYMENT HISTORY:

Employer: _____ Phone: _____

Address: _____ Hire Date? _____

Salary: _____ Position: _____ Temp/Full Time? _____

(Employment must be verified in writing with copy of pay stub or letter from employer. Self-Employment can be verified by Tax Returns or Statement from Accountant.)

Co-Applicant's Employer: _____ Phone: _____

Address: _____ Hire Date? _____

Salary: _____ Position: _____ Temp/Full Time? _____

VEHICLE INFORMATION:

Make of Vehicle: _____ Model: _____ Color: _____ Year: _____ License #: _____

Make of Vehicle: _____ Model: _____ Color: _____ Year: _____ License #: _____

EMERGENCY CONTACT:

Name: _____ Relation: _____ Phone: _____

Address: _____

By signing below, applicant and co-applicant understands that as a normal process, the above information will be verified by an agent of SR Properties. Applicant has submitted the \$ _____ (application fee) for processing this information and credit history and understands this is a non-refundable fee. Agent may request additional information to be provided and applicant will have 72 hours from submitting application to provide the information or the rental deposit in the sum of \$ _____ which is non-refundable. In addition, this deposit will be non-refundable in the event applicant cancels intent to become a resident after 72 hours of making application. Any false information may constitute grounds for rejection and/or forfeiture of deposits. By signing, I/we authorize permission to run a credit check.

Applicant _____ Date _____

Co-Applicant _____ Date _____

