

LONG-TERM RENTAL APPLICATION

PROPERTY INFORMATION

Date: _____ (mm/dd/yyyy)

Property address:

_____ (Street) _____ (Unit, if any)

_____ (City), _____ (State) _____ (ZIP code)

Rent amount: \$ _____ /month Rental application fee: \$ _____

APPLICANT PERSONAL INFORMATION

Applicant name:

_____ DOB: _____ SSN: _____

Other name(s) applicant has used in past 5 years: _____

Applicant contact information:

Cell phone #: _____ Work phone #: _____ Email: _____

Driver's license state and number: _____

Will there be other occupants in this apartment? YES / NO

If YES, list other occupants:

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Name: _____ DOB: _____ SSN: _____

Note: If other occupant(s) are 18+ years of age, they must complete a separate application.

APPLICANT RENTAL HISTORY

Applicant present address: _____

How long? _____ Monthly rent: \$ _____ Reason for leaving? _____

Previous landlord name: _____ Phone #: _____

Email: _____

Applicant previous address: _____

How long? _____ Monthly rent: \$ _____ Reason for leaving? _____

Previous landlord name: _____ Phone #: _____

Email: _____

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APPLICANT EMPLOYMENT HISTORY

Current employer: _____ Position: _____ Salary: \$ _____

Work address: _____ Term of employment: _____ to _____

Work phone: _____ Supervisor name and phone #: _____

Previous employer: _____ Position: _____ Salary: \$ _____

Work address: _____ Term of employment: _____ to _____

Work phone: _____ Supervisor name and phone #: _____

BACKGROUND INFORMATION

Checking and/or Savings Accounts:

Bank: _____ Address: _____ Account #: _____

Bank: _____ Address: _____ Account #: _____

Bank: _____ Address: _____ Account #: _____

Charge Accounts and/or Credits Cards:

Bank: _____ Address: _____ Account #: _____

Bank: _____ Address: _____ Account #: _____

Bank: _____ Address: _____ Account #: _____

Loans: _____ Monthly payments: \$ _____

Other sources of income: \$ _____

Do you have a pet(s)? YES / NO If YES, list information for pet(s) below:

Breed: _____ Weight: _____ YOB: _____ Color: _____

Breed: _____ Weight: _____ YOB: _____ Color: _____

Breed: _____ Weight: _____ YOB: _____ Color: _____

Do you smoke? YES / NO

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REFERENCES

Personal References (People you have known at least one year):

Name: _____ Relation: _____ Phone #: _____
Name: _____ Relation: _____ Phone #: _____
Name: _____ Relation: _____ Phone #: _____

Business References (Doctors, Attorneys, Accountants, Co-workers, etc.):

Name: _____ Relation: _____ Phone #: _____
Name: _____ Relation: _____ Phone #: _____
Name: _____ Relation: _____ Phone #: _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relation: _____ Phone #: _____
Name: _____ Relation: _____ Phone #: _____

I hereby authorize _____ (Landlord Name/Company) to contact reporting agencies, credit bureaus, or other investigative agencies to check the information listed herein, or other data that I have provided pertaining to my employment history, prior tenancies, credit, and general character.

Applicant Signature: _____ Date of Signature: _____