

LEASE APPLICATION

Application Fee: \$35.00

Office: (270)982-3555 Cell: (270)268- Rent Fax: (270)737-4524

Desired Date of Occupancy _____

PERSONAL INFORMATION

Applicant's Full Name _____

Date of Birth ____/____/____ Last First Middle Marital Status _____ Social Security Number _____ - ____ - _____

List all persons who will live in the apartment Date of Birth Sex Social Security # Relationship

1. _____
2. _____
3. _____
4. _____

Total number of persons in household _____.

Do you have a pet? ___ Yes ___ No (check one) Description of Pet _____

RESIDENCE HISTORY

Current Address _____ Previous Address _____
Street Street

City State Zip Telephone City State Zip Telephone

Landlord's Name _____ Landlord's Name _____
Address _____ Address _____

City State Zip Telephone City State Zip Telephone

How Long? _____ Rent _____/month How Long? _____ Rent _____/month

Reason for Moving _____ Reason for Moving _____

Have you ever been evicted from any residence? ___ Yes ___ No - If Yes, Why? _____

EMPLOYMENT & INCOME INFORMATION (payroll stub)

Applicant's Employer _____ Co-Applicant's Employer _____

Address Telephone Address Telephone

Position Held How Long? Position Held How Long?

Gross rate of pay \$ _____/month Gross rate of pay \$ _____/month

Number of hours per week _____ Number of hours per week _____

Amount of overtime, bonus, etc. _____ Amount of overtime, bonus, etc. _____

OTHER INCOME (Optional):

AFDC \$ _____ per _____ Alimony/Support \$ _____ per _____

Social Security \$ _____ per _____ Type of Benefit _____

Pensions \$ _____ per _____ Type of Benefit _____

Other \$ _____ per _____ Please describe _____

TOTAL ANNUAL INCOME Under \$16,000 _____ \$16,000 - \$20,000 _____ Over \$20,000 _____

What are you current monthly expenses not including rent? \$ _____

LEASE APPLICATION, cont'd

BANK REFERENCES

Name	Account Name (savings/checking) & Account Number	Telephone
1. _____	_____	(____) _____
2. _____	_____	(____) _____
3. _____	_____	(____) _____

Do you have a criminal, civil or small claims record? Yes _____ No _____ If yes, please explain _____

OTHER INFORMATION

In case of personal emergency, notify:

Name _____ Relationship _____

Address _____ Telephone (____) _____

Street City State Zip

Number of automobiles _____

Make _____	Year _____	Color _____	Tag # _____	State _____
Make _____	Year _____	Color _____	Tag # _____	State _____

Reason for Applying _____

How did you find out about our townhome community? Ads _____ Flyers _____ Radio _____ Person _____ Tenant _____

Other (explain) _____

I CERTIFY THAT THE FOREGOING INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. UNDERSTAND THAT GIVING FALSE INFORMATION ON THIS APPLICATION IS BASIS FOR REJECTION AND COULD BASIS FOR EVICTION. BY MY SIGNATURE, I AUTHORIZE YOU TO CONTACT ANY REFERENCES LISTED ON THIS APPLICATION. IF APPLICATE IS MILITARY PERSONNEL, PLEASE PROVIDE A COPY OF YOUR ORDERS.

APPLICANT

CO-APPLICANT

DATE

ACCEPTED BY: _____
Representative