

RENTAL APPLICATION

FIRST NAME:	MI: I	AST NAME:	
RIN #: CURRENT ADDRESS:		CITY:	
STATE: ZIP: TELE	PHONE #:		
E-MAIL ADDRESS:		CELL #:	
DATE OF BIRTH:	SSN:	Gender:	
I AM APPLYING FOR FALL OF	or SPRING OF	and requesting room type	
One Bedroom			
Two Bedroom			
Three Bedroom			
Four Bedroom			
(TERM) /(YE OCCUPANTS LIST ALL HOUSEHOLD MEMBERS WF TO FILL OUT A SEPARATE APPLICATE BEDROOM.	IO YOU WISH YOU LIVE IN		
FULL NAME	RELATIONSHIP	DATE OF BIRTH	SSN
FULL NAME	RELATIONSHIP	DATE OF BIRTH	SSN
FULL NAME	RELATIONSHIP	DATE OF BIRTH	SSN
FULL NAME	RELATIONSHIP	DATE OF BIRTH	SSN
VEHICLE INFORMATION			
DRIVER'S LICENSE/ID NUMBER:			
STATE:VEHIC	LE YEAR/MAKE:		
LICENSE PLATE #:	COLOR:		

EMERGENCY CONTACT INFORMATION

APPLICANT'S SIGNATURE / DATE

EMERGENCY CONTACT #1:	(NAME)/	(TELEPHONE #)
EMERGENCY CONTACT #2:	(NAME)/_	(TELEPHONE #)
HAVE YOU EVER		
Been evicted from tenancy? YES NO If yes, please explain:		
Been convicted of a felon? YES NO If yes, please explain:		
Willfully or intentionally refused to pay rent when If <i>yes</i> , please explain:	due? YES NO	
Will this unit be your only place of residency? YES If <i>no</i> , please explain:	; NO	
PLEASE READ CAREFULLY BEFORE SIGN	ING	
conduct a credit, background, criminal and referen may use any credit bureau and any reporting or inv any other credit information that may be submitted be signed and completed with security deposit and	nce check of me and any guarantors requivestigative agencies to obtain records reg by the aforementioned agencies. Approve administrative fee prior to the time of pro	arding my credit tendencies, employment history, an al of application does not guarantee room; lease mus