

APPLICATION FOR APARTMENT

Name: _____ Phone: _____
 Driver License #: _____ Social Security #: _____
 Date of Birth: _____ Marital Status: Married Divorced
 Separated Widow Single
 Present Address: _____
 Street City State Zip Code
 Present Employer: _____
 Name Address Phone
 Position: _____ Salary: _____ per _____
 If you have no salary, from what source will you pay rent? _____

How did you hear about us: RENTNET Sunshine Pages Gonzales Weekly Ad
 Apartment Guide of Baton Rouge Friend _____
 Other _____

Name of Spouse or Roommate _____ Date of Birth _____
 Social Security No. _____ Phone _____
 Present Employer: _____
 Name Complete Address Phone
 Position: _____ Salary _____ per _____

OTHER PERSONS WHO WILL OCCUPY THIS APARTMENT WITH YOU:

Name	Relationship	DOB	Sex
Name	Relationship	DOB	Sex

RENTAL HISTORY
 Have you ever resided in an apartment owned by Merci Properties? Yes No
 If so, who was the lease holder _____ When _____
 Have you ever defaulted on a lease? Yes No
 If so, with what property _____ When _____
 Please provide the name/address/phone no. of any apartments where you have lived within the last five years:

Applicant has provided herewith the sum of **\$35.00**, receipt of which is hereby acknowledged as a **non-refundable fee** for the purpose of processing this application. This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by an officer of said company and delivery of a lease covering said premises. Please allow a minimum of five (5) to seven (7) days to process your application for both credit and character references.

THE ABOVE INFORMATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. I HAVE NO OBJECTION TO INQUIRIES FOR THE PURPOSE OF VERIFICATION OF THE ABOVE STATEMENT. IT IS UNDERSTOOD THAT THE INFORMATION WILL BE HELD STRICTLY CONFIDENTIAL. IT IS FURTHER UNDERSTOOD THAT THIS APPLICATION WILL BECOME PART OF THE LEASE AGREEMENT BY AND BETWEEN THE APPLICANT AND MERCI PROPERTIES SHOULD THE OWNER APPROVE THIS APPLICATION AND A SUBSEQUENT LEASE IS EXECUTED. SHOULD ANY OF THE ABOVE INFORMATION PROVE FALSE NOW OR AT A LATER DATE, THE OWNER WILL HAVE THE RIGHT TO CANCEL THE LEASE.

APPLICANT: _____ DATE _____

DOCUMENTATION REQUIRED WITH THIS APPLICATION:

Social Security Card - Copy

Driver's License - Copy

Proof of Income: 2 current paystubs, employer verification, or bank statements if paystubs not applicable.

OFFICE USE ONLY – TO BE COMPLETED BY INTERVIEWING AGENT

UNIT APPLIED FOR: _____

Ascension Townhomes Country Village Courtyard Gonzales Gardens

Quoted rental rate per month: _____

Lease Terms Desired: _____

Move-In Date: _____

Interviewed by: _____ Date: _____