

Application To Rent

Individual application required from each occupant 18 years of age or older, with all sections completed.

Last Name		First Name		Middle Name		Social Security Number	
Date of Birth		Driver's License Number		State	Exp.Date	Home Phone Number ()	Cell Phone Number ()
1	Present Address			City	State	Zip Code	
	Date In	Date Out		Owner/Mgr. Name		Owner/Mgr. Phone Number ()	
Reason for Moving							
2	Previous Address			City	State	Zip Code	
	Date In	Date Out		Owner/Mgr. Name		Owner/Mgr. Phone Number ()	
Reason for Moving							
3	Next Previous Address			City	State	Zip Code	
	Date In	Date Out		Owner/Mgr. Name		Owner/Mgr. Phone Number ()	
Reason for Moving							
List All Proposed Occupants in Addition to Yourself	Name		Age	Name		Age	
	Name		Age	Name		Age	
Present Occupation		Salary \$	<input type="checkbox"/> week <input type="checkbox"/> month	Employer Name			
How long with this employer		Phone Number ()		Employer Address			
Name of your supervisor				City	State	Zip Code	
Prior Occupation		Salary \$	<input type="checkbox"/> week <input type="checkbox"/> month	Employer Name			
How long with this employer		Phone Number ()		Employer Address			
Name of your supervisor				City	State	Zip Code	
Account Number		Name of Your Bank			Branch or Address		
Checking							
Savings							
Name of Creditor		Address		Phone Number		Mo. Pmt. Amt.	
1.				()		\$	
2.				()		\$	
3.				()		\$	
In case of emergency, notify:				Relationship:			
Address			City	State	Zip Code	Phone Number ()	
Personal References		Address		City	State	Zip Code	Phone Number
1.						()	
2.						()	
3.						()	
Mother's maiden name: _____ Will you have pets? _____ Describe: _____ Liquid filled furniture? _____ Describe: _____ Have you ever filed bankruptcy? _____ Have you ever been evicted or asked to move? (describe) _____ Have you ever been convicted of a felony? (describe) _____ Have you ever used other names? _____ If so, list _____ Automobile: Make _____ Model _____ Year _____ License No. _____ Automobile: Make _____ Model _____ Year _____ License No. _____							
Applicant represents that the above statements are true and correct and hereby authorizes verification of items including, but not limited to the obtaining of tenancy and credit reports and agrees to furnish additional credit references upon request. Applicant certifies under penalty of perjury that the foregoing is true and correct, and authorizes owner or his agents to obtain applicant's tenancy, credit and criminal history reports, and further authorizes owner and his agents to investigate the information provided herein, and to make further inquiry and review as necessary. Applicant acknowledges that owner shall rely on the information provided herein, and that any material misstatement will at owner's option be a material and non-curable breach of any subsequent rental agreement and grounds for immediate eviction.							
Date _____ Applicant _____							



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Name of your supervisor				City	State	Zip Code	
Prior Occupation		Salary \$	<input type="checkbox"/> week <input type="checkbox"/> month	Employer Name			
How long with this employer		Phone Number ()		Employer Address			
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Date _____ Applicant _____							

Fax to: Wallace F Ackley Co
(614) 231-2007

Attn: James Clark

