

APARTMENT RENTAL APPLICATION FORM

Applicant Personal Information

Full Name: _____
Date of Birth: _____ **Social Security No.:** _____
Phone Number: _____
Email Address: _____

Current Address

Street Address: _____
City: _____ **State:** _____ **Zip Code:** _____
Length of Residence: _____

Previous Address (if less than 2 years at current)

Street Address: _____
City: _____ **State:** _____ **Zip Code:** _____
Length of Residence: _____

Employment Information

Current Employer: _____
Employer Address: _____
Position/Title: _____ **Monthly Income:** _____
Supervisor Name: _____
Supervisor Phone: _____

Rental History (last 2 addresses)

Landlord Name: _____ **Phone:** _____
Reason for Leaving: _____

Personal References (not related)

| Name | Relationship | Phone Number | Email Address |
|------|--------------|--------------|---------------|
| | | | |
| | | | |
| | | | |

Vehicle Information (if parking requested)

Make / Model: _____ **Year:** _____ **Color:** _____
License Plate Number: _____

Additional Occupants

| Name | Relationship | Age |
|------|--------------|-----|
| | | |
| | | |
| | | |

Authorization and Declarations

I certify that the information provided in this application is true and complete to the best of my knowledge. I authorize the landlord and its agent(s) to verify any and all information provided, including but not limited to credit history, rental history, employment, and criminal background checks. I understand that providing false information may result in denial of this application or termination of tenancy. I agree to comply with all terms and conditions set forth in the lease agreement if approved for tenancy.

APPLICANT'S SIGNATURE

DATE

Signature: _____

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