

CREDIT & BACKGROUND APPLICATION FOR RENTAL

Corporate Connection

Agent

All information must be filled in completely and legibly in order for the application to be processed. If the information does not apply, please put N/A (not applicable).

Applicant's Last Name	First	Middle Initial	Birthdate	Driver's License Number & State	Social Security Number	Sex
Spouse's Last Name	First	Middle Initial	Birthdate	Driver's License Number & State	Social Security Number	Sex
Single Married	<i>Other Occupants</i>					
	Name		Relationship		Birthdate	Sex
Expected Move-In Date	Name		Relationship		Birthdate	Sex
	Name		Relationship		Birthdate	Sex
Apt #	Name		Relationship		Birthdate	Sex
Do you have pet(s)?	Type(s)		Size(s)			
<input type="checkbox"/> Yes <input type="checkbox"/> No						
How many?	<i>(Keeping of pets requires Management consent, approved Pet Application, and payment of required monies.)</i>					

PART I RESIDENCE HISTORY – 2 YEARS

Present Address	City	State	Zip	Home Phone ()	<input type="checkbox"/> Own
				Cell Phone ()	<input type="checkbox"/> Rent
Name of Present Landlord or Mortgage Co.		Landlord Phone ()	Landlord Fax ()	How Long?	Monthly Payment?
Previous Address	City	State	Zip	<input type="checkbox"/> Own	
<input type="checkbox"/> Rent					

PART II EMPLOYMENT HISTORY - CURRENT

Applicant Employed By	Address		City	State	Zip	How Long?
Position Held/Occupation	Gross Salary \$ per	Supervisor's Name		Employer's Phone ()	Employer's Fax ()	
Applicant Employed By (Other Current Employment)		Address		City	State	Zip
Position Held/Occupation	Gross Salary \$ per	Supervisor's Name		Employer's Phone ()	Employer's Fax ()	
Spouse Employed By		Address		City	State	Zip
Position Held/Occupation	Gross Salary \$ per	Supervisor's Name		Employer's Phone ()	Employer's Fax ()	
Spouse Employed By (Other Current Employment)		Address		City	State	Zip
Position Held/Occupation	Gross Salary \$ per	Supervisor's Name		Employer's Phone ()	Employer's Fax ()	

ADDITIONAL INCOME (Such as child support, alimony, parental support or annual bonuses/commissions)

Source _____ Amount \$ _____ per _____

PART III VEHICLE INFORMATION

No of Vehicles on Property	Do you have any recreational or work vehicles, vans, boats or motorcycles? If so, specify.					
Auto No. 1 – Year	Make	Model	Color	License Tag No.	State	
Auto No. 2 – Year	Make	Model	Color	License Tag No.	State	

PART IV EMERGENCY NOTIFICATION

Emergency Contact	Relationship		Daytime Phone ()			
Address	City	State	Zip	Alternate Phone ()		

PART V

Have you, your spouse, your roommate, or any occupant listed ever had a Dispossessory Warrant filed or been evicted from a leased premises? Yes No

If yes, explanation.

Have you, your spouse, your roommate, or any occupant listed ever been convicted of a felony? Yes No

If yes, state the offense, location, and date of conviction.

Applicant hereby authorizes verification of any and all information set forth on this Application, including release of information by any bank or savings and loan, employer, landlord and any Lender. All such information hereon, and released as authorized above, will be kept confidential. APPLICANT REPRESENTS THAT THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND COMPLETE. Material misrepresentations on this Application will constitute a default under the lease or Rental Agreement between the parties. This application must be signed before it can be processed by Management.

Applicant Signature _____ Date _____ Spouse Signature _____ Date _____