

Residence Tenant Application

1. Rental Property					
Address		Unit #	Monthly Rental	From	To

2. Personal Information			
1. Name	Date of Birth	Driver's License No	Occupation
2. Other Occupants:	Name	Relationship	Age
	Name	Relationship	Age
	Name	Relationship	Age
Do you have any pets?	If so, describe:	Why are you vacating your current place of residence?	
Guarantor's Name - if applicable	Relationship	Occupation	

3. Residence History			
Current Address		Previous Address	
From	To	From	To
Name of Landlord	Telephone Number	Name of Landlord	Telephone Number

4. Employment History			
Current Employer	Position Held	Previous Employer	Position Held
Business Address	Business Telephone	Business Address	Business Telephone
Name of Supervisor	Length of Employment	Name of Supervisor	Length of Employment
Currently Salary Monthly			

5. Personal References				
Name	Address	Telephone	Length of Acquaintance	Occupation
Name	Address	Telephone	Length of Acquaintance	Occupation

The Applicant consents to the collection, use and disclosure of the Applicant's personal information by the Landlord and/or agent of the Landlord, from time to time, for the purpose of determining the creditworthiness of the Applicant for the leasing of the premises or the real property, or making such other use of the personal information as the Landlord and/or agent of the Landlord deems appropriate.

The Applicant represents that all statements made above are true and correct. The Applicant is hereby notified that a consumer report containing credit and/or personal information may be referred to in connection with this rental. The Applicant authorizes the verification of the information contained in this application and information obtained from personal references. This application is not a Rental or Lease Agreement. In the event that this application is not accepted, any deposit submitted by the Applicant shall be returned.

Signature Of Applicant	Date	Email Address	Telephone Number
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Please submit along with this form your Equifax Report & Score and a copy of I.D.