

-BANK REFERENCES-

BANK \_\_\_\_\_ ACCT. # \_\_\_\_\_ TYPE \_\_\_\_\_ BRANCH \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_  
 BANK \_\_\_\_\_ ACCT. # \_\_\_\_\_ TYPE \_\_\_\_\_ BRANCH \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_

-CREDIT REFERENCES-

CREDITOR \_\_\_\_\_ ACCT # \_\_\_\_\_  
 CREDITOR \_\_\_\_\_ ACCT # \_\_\_\_\_  
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 CREDITOR \_\_\_\_\_ ACCT # \_\_\_\_\_

-MISCELLANEOUS DATA-

DRIVERS LIC. # & STATE \_\_\_\_\_ AUTO \_\_\_\_\_ TAG# \_\_\_\_\_ STATE \_\_\_\_\_  
 SPOUSE'S LIC.# & STATE \_\_\_\_\_ ALTO \_\_\_\_\_ TAG# \_\_\_\_\_ STATE \_\_\_\_\_

SPECIFY ANY RECREATIONAL VEHICLES OR MOTORCYCLES \_\_\_\_\_

# OF ADULTS IN APT. \_\_\_\_\_ # OF OCCUPANTS UNDER 21 \_\_\_\_\_

NAME & AGE OF OCCUPANTS UNDER 21 IN APT. \_\_\_\_\_ S.S.# \_\_\_\_\_  
 \_\_\_\_\_ S.S.# \_\_\_\_\_  
 \_\_\_\_\_ S.S.# \_\_\_\_\_  
 \_\_\_\_\_ S.S.# \_\_\_\_\_

HOW DID YOU HEAR ABOUT OUR COMMUNITY? \_\_\_\_\_

HOW MANY MILES FROM OUR COMMUNITY TO WORK? \_\_\_\_\_

IN CASE OF EMERGENCY - NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ ST \_\_\_\_\_ PH.# \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

-SIGNATURE-

A NON-REFUNDABLE CHARGE OF \$ \_\_\_\_\_ IS REQUIRED FOR PROCESSING OF THIS APPLICATION.

\*AN APPLICATION MUST BE PROCESSED FOR ALL ADULTS OCCUPYING THE APARTMENT BEFORE IT CAN BE CONSIDERED BY MANAGEMENT.

RECEIPT OF \$ \_\_\_\_\_ FROM APPLICANT ACKNOWLEDGED AS A NON-REFUNDABLE ADMINISTRATIVE FEE / PROCESSING CHARGE. ACCEPTANCE OF APPLICATION IS APPROVED BY LANDLORD. DEPOSIT OF \$ 100.00 WAS MADE IN FULL BY APPLICANT. IF APPLICATION IS APPROVED, SAID DEPOSIT WILL BE APPLIED TO THE SECURITY DEPOSIT AT THE TIME OF MOVE IN.

APPLICANT MAY WITHDRAW THIS APPLICATION WITHIN 72 HOURS AND ALL MONIES GIVEN THEREFOR SHALL BE REFUNDED EXCEPT FOR PROCESSING CHARGE.

IF APPLICANT FAILS TO EXECUTE A RENTAL AGREEMENT OR REFUSES TO OCCUPY PREMISES ON AGREED UPON DATE, ALL MONIES GIVEN SHALL BE RETAINED BY LANDLORD AS LIQUIDATED DAMAGES. IF APPLICANT IS NOT APPROVED, ALL MONIES GIVEN, LESS PROCESSING FEE, SHALL BE RETURNED TO APPLICANT.

I/WE CERTIFY THAT THE INFORMATION GIVEN HEREIN IS COMPLETE, TRUE, AND CORRECT. OWNER OR HIS AGENT IS HEREBY AUTHORIZED TO VERIFY THE ACCURACY AND CORRECTNESS OF THESE STATEMENTS, TO COMMUNICATE WITH MY/OUR EMPLOYER AND CREDITORS, AND TO PROVIDE SUCH OTHER INFORMATION WHICH OWNER OR AGENT MAY REQUIRE TO EVALUATE THIS APPLICATION. THIS APPLICATION MUST BE SIGNED BEFORE IT CAN BE PROCESSED. ANY FALSE INFORMATION WILL CONSTITUTE GROUNDS FOR DENIAL OF APPLICATION.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_