

Rental Application



Building #	Unit	Rent Amount	Deposit \$	Lease Term	Guest Card Source	Move In Date
Community			Concessions / Move In Specials		Leasing Consultant	
Visual Proof of: <input type="checkbox"/> Driver's License <input type="checkbox"/> Social Security Card <input type="checkbox"/>						

Applicant Information Co-Applicant Information

First Name M I Last Name Current Street Address City State Zip Code Home Phone Number Cell Phone Number E-Mail Address Social Security # Date of Birth Age Driver's License # State Expiration Date	First Name M I Last Name Current Street Address City State Zip Code Home Phone Number Cell Phone Number E-Mail Address Social Security # Date of Birth Age Driver's License # State Expiration Date
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Names of Other Occupants:	Do you have a pet? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Size and Type:

Residential Information & History

Current Landlord Name City State Landlord's Phone Number Monthly Payment Amount Did you... <input type="checkbox"/> Own <input type="checkbox"/> Dorm Room Move In Date <input type="checkbox"/> Rent <input type="checkbox"/> Live w/Relatives Reason for Leaving Previous Address Previous City State Zip Code	Current Landlord Name City State Landlord's Phone Number Monthly Payment Amount Did you... <input type="checkbox"/> Own <input type="checkbox"/> Dorm Room Move In Date Move Out Date <input type="checkbox"/> Rent <input type="checkbox"/> Live w/Relatives Reason for Leaving Previous Address Previous City State Zip Code
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Employment Information

Current Employer Supervisor's Name Employer Address City/State Zip Code Employer Phone Number Monthly Salary \$ Position Start Date <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Self Employed Additional Income Source Monthly Amount Phone # \$	Current Employer Supervisors Name Employer Address City/State Zip Code Employer Phone Number Monthly Salary \$ Position From/To <input type="checkbox"/> Full Time <input type="checkbox"/> Temporary <input type="checkbox"/> Part Time <input type="checkbox"/> Self Employed Additional Income Source Monthly Amount Phone # \$
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Other Information

Vehicles	Car Make	Model	Color	Year	License Plate #	State	Financed By	Monthly Payment \$	
	Car Make	Model	Color	Year	License Plate #	State	Financed By	Monthly Payment \$	
	Name of Nearest Relative	Relationship	Address			City	State	Zip Code	Phone Number

EMERGENCY
CONTACT

Relationship

Address

City

State

Zip Code

Phone Number

E-Mail

Alternate #

Have you ever been convicted of a felony or sex-related crime? Yes No If yes please complete the following

information:

How did you hear about us?

County:

City:

State:

I understand I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ _____. Upon approval of this and the signing of an apartment rental agreement, this fee will be credited against my deposit in consideration for landlord holding said apartment _____. I hereby waive all rights to the return of said holding fee and said fee shall be retained as liquidated damage in the event I do not choose to enter into the agreement applied for herein in the event said application for tenancy is not accepted holding fee shall be returned to applicant.

In compliance with the State and Federal laws, this is to inform you that a consumer investigation involving the statements made on your rental application for tenancy at the above mentioned apartment is being initiated. You have the right to dispute the information reported. Direct inquiries to credit reporting mediums. I/We certify that to the best of my/our knowledge all statements are true and correct. I/We further authorize Wilkinson Asset Management to obtain credit reports, character verification of rental history, employment history, public records and personal references as necessary to verify all information put forth in the above referenced application for tenancy. False, fraudulent or misleading information may be grounds for denial of tenancy or subsequent eviction. I/We also agree and understand that the owner, its agents and employees may obtain additional consumer reports on each of us in the future to update or review our account. Upon my/our request, owner will tell me/us whether consumer reports were requested and the names and addresses of any consumer reporting agency that provided such reports.

Applicant Signature

Co-Applicant Signature

Date

Agent for Landlord

Date