

# Rental Application

## Personal History

**EACH ADULT TO APPEAR ON THE LEASE MUST FILL OUT A SEPARATE APPLICATION UNLESS ASSETS AND LIABILITIES ARE JOINTLY HELD**

	Last Name	Suffix	First Name	Initial	Date Of Birth*
Applicant					
Co-Applicant					

**\* Necessary for verification by Credit Reporting Agency**

Name Of All Other Occupants To Live In House	Last Name	Suffix	First Name	Initial	Date Of Birth*

**\* Necessary for verification by Credit Reporting Agency**

### Present or last residence

Address	App. No.	City	State	Zip	Phone

Resided From:	Resided To:	Monthly Mortgage Payment	Monthly Rental Payment

Name Of Mortgage Co. Or Landlord	Work No.	Home No.

Reason For Moving

### Previous (if at present residence less than two (2) years)

Address	App. No.	City	State	Zip	Phone

Resided From:	Resided To:	Monthly Mortgage Payment	Monthly Rental Payment

Name Of Mortgage Co. Or Landlord	Work No.	Home No.

Reason For Moving

## Employment History

**MILITARY:** Attach copy of latest Leave & Earnings Statement and/or Transfer Orders | **SELF-EMPLOYED:** Attach copies of past two (2) years U.S. Tax Form 1040 & Schedule C. | **HOURLY/WEEKLY EMPLOYEES:** Attach copies of past two (2) years Form W-2.

### Present Employment

IF MILITARY

Rank/Rate	Branch	Length Of Service

Employed By	Employed Since

Business Address	City	State	Zip	Phone

Position	Salary	Per	No. Of Hours Per Week

Supervisor Name and Title	Phone

### Previous Employment (if with present employer less than two (2) years)

Employed By	Employed Since

Business Address	City	State	Zip	Phone

Position	Salary	Per	No. Of Hours Per Week

Supervisor Name and Title	Phone

### Co -Applicant Present Employment

IF MILITARY

Rank/Rate	Branch	Length Of Service

Employed By	Employed Since

Business Address	City	State	Zip	Phone

Position	Salary	Per	No. Of Hours Per Week

Supervisor Name and Title	Phone

**Co -Applicant Previous Employment (if with present employer less than two (2) years)**

Employed By	Employed Since

Business Address	City	State	Zip	Phone

Position	Salary	Per	No. Of Hours Per Week

Supervisor Name and Title	Phone

**Applicant/Co-Applicant Other Income**

\$ Amount	Per	Source

**Financial History****Bank References**

Bank Name	Savings/Checking/Other	Current Balance

Monthly Payments (Payments of 3 months or more duration, e.g., Auto, Mortgage, Alimony, Dependent, Support, Taxes, Garnishment, Etc.)

To	For	Balance	Monthly Payment \$

Has Applicant Ever Filed For Bankruptcy? ☐ Yes ☐ No