SANCXUARY

APPLICATION SUMMARY

Apartment Information

Apartment: Unit 112 Move In Date: 07/17/2020

Model: A2 Lease Term: 15 Mo

Bed: 1 **Deposit:** \$500.00

Bath: 1 **Rent:** \$1976.50

Area: 822 Sq. Ft.

Applicant Information

Name: Dharvik Inc Date Of Birth: 06/02/2002

Email: coapp16june@yopmail.com SSN#: ***-**-0000

Phone: (664) 566-5461 Government Issued Id ():

Government Issuing Entity: Government Issuing Country: United States

Current Residence Information

Residency From: knhk, jhkhkkjvcfghjkl,

Alaska 2131

Monthly Payment: \$0.00 Country: United States

Apartment Community: Was proper notice given per
Yes

your lease agreement?:

Management Company: Management Company Phone:

Employment Information

Country: United States Job Title:

| Employment Information | | | | | | | |
|--|-------|------|--------------|-----------------------|--------|-------|--|
| Employment: | | | E | Employed Since: | | | |
| Employeer: | | | A | Annual Income: \$0.00 | | | |
| Supervisor Name: | | | Additional A | Annual Income: | \$0.00 | | |
| Address: " | | | Em | ployers Phone: | | | |
| Emergency Information | | | | | | | |
| Emergency Information | | | | | | | |
| Name: | | | | Relationship: | | | |
| Phone: | | | | Email: | | | |
| Country: United States | | | | Address: | " | | |
| Pet Infromation | | | | | | | |
| | | | | | | | |
| Pet N | Name | Bre | Breed | | Weight | | |
| Vehicle Infromation | | | | | | | |
| Make | Model | Year | Color | Licence | | State | |
| | | | | | | | |
| Additional Questions | | | | | | | |
| Have you ever been evicted? If yes, details | | | | | | No | |
| Do you or any occupants smoke? | | | | | | No | |
| Referred by another Resident? If yes, provide name | | | | | | No | |
| Broker or Merchant referred | | | | | | No | |
| SHOMA MGMT & & COLANGUARY | | | | | | | |