

# Springfield Villas Pre-Rental Application



## Applicant Information

Name:		Drivers License or ID Number:		State	Number
Date of Birth:		SSN:		Phone:	
Current address:					
City:		State:		ZIP Code:	
Own	Rent	(Please circle)	Monthly payment or rent: \$		How long?
Previous address:					
City:		State:		ZIP Code:	
Owned	Rented	(Please circle)	Monthly payment or rent: \$		How long?
					# of Family Members _____
					Request 2 Bedroom _____
					Request 3 Bedroom _____

## Current Income Information – Employment, Child Support, SSI, SS, etc

Name of Income Source(s):			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	State:		ZIP Code:
Position:	Hourly	Salary	(Please circle)
			Total Monthly income:

## Emergency Contact

Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			

## Co-applicant Information → Any Member over 18 years of Age (Use additional Applications if needed)

Name:		Drivers License or ID Number:		State	Number
Date of birth:		SSN:		Phone:	
Current address:					
City:		State:		ZIP Code:	
Own	Rent	(Please circle)	Monthly payment or rent:		How long?
Previous address:					
City:		State:		ZIP Code:	
Owned	Rented	(Please circle)	Monthly payment or rent:		How long?

## Co-applicant Current Income Information – Employment, Child Support, SSI, SS, etc

Name of Income Source(s):			
Employer address:			How long?
Phone:	E-mail:		Fax:
City:	State:		ZIP Code:
Position:	Hourly	Salary	(Please circle)
			Total Monthly income:

## Landlord References – Must be able to Verify Previous Rental History

Name of Landlord:	Address of Rental Property	Phone:

I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.

Signature of applicant:	Date:
Signature of co-applicant:	Date: