Application for Residency for Applicant

You must answer all questions and provide complete and accurate information. Failure to do so may result in a delay in processing or rejection of your eligibility approval.

We do business in Accordance with the Federal Fair Housing Law. We will not discriminate against any person because of race, color, religion, sex, handicap, familial status or national origin, (The Fair Housing Amendments Act of 1988).

A 31 (A)				Enter your Social Security	Number
Applicant Name:				-	
Current Address:				Birth Date (MM/DD/YY)	
Current Address:	City	State	Zip	Telephone Number: ()	
D 0	•			Driver License #:	
Rent or Own:	Move In Date of Current	t Address:		_ Email:	
Rent/Mortgage Amount: \$				- Vehicle #1 Informati	on
Present Landlord/Mortgage Holder:		Phone #	:	Make:	
Their Address:				Model: Year:	
Their Address.	City	State	Zip	Color:	
Reason for Moving:				License Plate #:	
Previous Address:					
	City	State	Zip	Vehicle #2 Informati	on
Rent or Own:	Move In Date of Previou	us Address:		Model:	
Dont/Mortgo on Amounts \$				Year:	
Rent/Mortgage Amount: \$				- Color:	
Previous Landlord/Mortgage Holder: Phone #:				License Plate #:	
Their Address:				Pet Information	
Reason for Moving:	City	State	Zip	Do you own a pet? Yes or N	10
Reason for Woving.				Type & Breed: Color:	
Pre	sent Employment Informat	tion		Weight at Maturity:	
Present Employer:				Height at Maturity:	
				-	
Address:	City	State	Zip	Person to Notify in Case of E	mergency
	•	State	Ζip	Name: Address:	
Phone #:	Supervisor Name:			Phone #:	
Position:	Employed Since:			Relationship:	
Present Monthly Gross Income: \$				Other Person(s) to Occupy to	ha Uama
				Name:	ne nome
Prev	vious Employment Informa	ation		DOB:	-
Previous Employer:				Relationship:	
Address:				Name: DOB:	
Address.	City	State	Zip	Relationship:	
Dhone #:	Supervisor Name:		•	FOR OFFICE USE OF	JI V
Phone #:	Supervisor Name:			-	(L1
Position:	Employed From:		to:	Building and Apt#:	
Monthly Gross Income at time of Se	eparation: \$			- M 41 D 4 6	
Other Income: \$				Monthly Rent: \$	
Disability, Pension, Social Security,	Welfare Assistance, Child S	Support, Alim	ony, Unemployment,	-	
etc.				Agents Initials:	
Have any creditors used a collection agency, credit bureau, or attorney to collect moneys that you owed? Are you a current user or addicted to an illegal drug? Have you ever been arrested for or convicted of the illegal manufacture or distribution of a controlled substance? YES or NO Have you ever been evicted from any type of housing unit for cause? YES or NO Have you ever been arrested for or convicted of a criminal offense? YES or NO If you answered YES to any questions in this section, please explain:					
I declare that all of the above information and representations contained herein are to the best of my knowledge and belief true and correct. I consent to any inquiry of credit, criminal, rental, employment history and other relevant information by Owner or its Agent necessary to obtain references and to verify the information in this Application; and release Owner, its Agent and employees from any and all liability for any damage whatsoever incurred in furnishing such information. Upon approval and acceptance, I agree to execute a Rental Agreement and pay security deposit and first month's rent before possession is granted. I understand that any Rental Agreement I enter into may be canceled at any time without liability by the Owner or its Agent if any information or representation upon which they relied and I made in this application is misleading, incorrect or untrue.					

Date:

Applicant Signature: