Return to; Chuck Hardy 806.789.7756 direct 815.301.9006 fax chuckhardy@me.com

Residential Lease Application Each occupant and co-applicant 18 years or older must submit a separate application

Property Address:				
Anticipated Move-in Date:	Monthly Rent:	Security	/ Deposit:	
Applicant's name (first, mid Is there a co-applicant? o	ddle, last) yes o no If yes, co—applican	nt must submit a separa	ate application.	
Applicant's former last name	e (maiden or married):			
E-mail:				
Home Phone:				
Work phone:				
Cell Phone:				
Soc Sec No.:	Driver's Lice	ense No.:	in	(state)
Date of Birth:	Height:	Weight:	Eye Color:	
Hair Color:	Marital Status:	Citizensh	nip:	(country)
Emergency Contact Name & Nur	mber:			
Name of all other persons w	ho will occupy the Property:			
Name:		ationship:	Age:	
Name:	Rela	ationship:	Age:	
Name:	Rela	ationship:	Age:	
Applicant's Current Address	:			
Landlord's Name:				state, 21p)
Landlord's Phones:	(day)	(night)		(cell)
Date Moved-in:	Move-out Date:	Rent \$:		
Reason for move:				Applican
Previous Address:		Apt	:.No.:	
			(c	ity, state, z
Landlord's Name:				
Landlord's Phones:	(day)	(night)		(cell)
Date Moved-in:	Move-out Date:	Rent \$:		
Reason for move:				
Applicant's Current Employe	r			
Address				Superviso
Name	Phone			
Start Date G	ross Monthly Income \$	Position		
Applicant's Previous Employe	er			
Address				
Supervisor's Name	Pho	ne		
Employed From To	Gross Monthly Inco	ome \$ Posit	ion	

If Applicant is under 21 years of age, provide parent's names	and add	resses;				
Parent NamePh	one					
Address						
Parent NamePhone						
Address Will applicant provide Guarantor(s) yes no (circle one)						
						Describe all other income Applicant wants considered
Bank's Name and Phone at which Landlord may verify funds for a	ny rent	, fee, d	or deposit;			
List all vehicles to be parked on the Property; type year make		model		license/state		
List all pets to be kept on the Property (dogs, cats, birds, r type&breed name color weight age gender	eptiles Neute		other pets); Declawed?	Rabies	Shots Current?	
	yes	no	yes no	yes	no	
	yes	no	yes no	yes	no	
Will any waterbeds or water filled furniture be on the Propert	v2 voc	no				
		_				
Does anyone who will occupy the property smoke?	yes	no				
Will Applicant maintain Renter's Insurance?	yes	no				
If Applicant is in the military, is Applicant serving under or limiting Applicant's stay to one year or less?	ders yes	no				
Has Applicant ever:	•					
Been evicted? Been asked to move out by a landlord?	yes yes					
Breached a lease or rental agreement?	yes					
Filed for bankruptcy? Lost property in a foreclosure?	yes yes					
Had any credit problems?	yes					
Been convicted of a crime?	yes	no				
Is the Applicant a registered sex offender?	yes	no				
Are there any criminal matters pending against any occupant?	yes	no				
Is there any additional information Applicant wants considered	? yes	no				
AUTHORIZATION & REPRESENTATION: Applicant authorizes Landlord any tenancy, to: (1) obtain a copy of Applicant's credit repor Applicant and any occupant; and (3) verify any rental, employm related to this application with persons knowledgeable of such this application are true and complete. Applicant understands and a breach of any lease.	t; (2) (ent, or informa	obtain a crimina ation.	a criminal backgr al history or ver Applicant repres	round check rify any oth sents that	related to her information the statements in	
NOTICE: Unless agreed to otherwise in writing, the Property and Landlord may continue to show the Property to other prospe					Agreement is sign	
FEES: Applicant submits an application Deposit of \$Application Deposit and Hold on Property.		in acco	ordance with the	attached A	greement for	
Applicant's Signature Date						