

# APPLICATION TO RENT

**THIS SECTION TO BE COMPLETED BY APPLICANT. A SEPARATE APPLICATION TO RENT IS REQUIRED FOR EACH OCCUPANT 18 YEARS OF AGE OR OVER, OR AN EMANCIPATED MINOR.**

PROPERTY APPLYING FOR \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_

DESIRED DATE OF OCCUPANCY \_\_\_\_\_ DESIRED LENGTH OF OCCUPANCY \_\_\_\_\_

APPLICANT NAME \_\_\_\_\_ DAYTIME PHONE# \_\_\_\_\_ EVENING PHONE # \_\_\_\_\_

SOCIAL SEC.# \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ DRIVERS LIC. # & STATE \_\_\_\_\_

NAMES OF OTHER PROPOSED OCCUPANTS (INCLUDING CHILDREN) \_\_\_\_\_

NO. OF PETS, WHAT KIND AND SIZE \_\_\_\_\_ NEUTERED? ( ) YES ( ) NO

**CURRENT ADDRESS** \_\_\_\_\_ ZIP \_\_\_\_\_ RENT \$ \_\_\_\_\_

CURRENT LANDLORD'S NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_ DATE YOU MOVED IN \_\_\_\_\_

**PREVIOUS ADDRESS** \_\_\_\_\_ RENT \$ \_\_\_\_\_

PREVIOUS LANDLORD'S NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_ DATES OF RESIDENCY \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_

**CURRENT EMPLOYER** \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

CURRENT POSITION \_\_\_\_\_ MONTHLY SALARY \$ \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_

**PREVIOUS EMPLOYER** \_\_\_\_\_ SUPERVISOR'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

POSITION \_\_\_\_\_ MONTHLY SALARY \$ \_\_\_\_\_ DATES OF EMPLOYMENT \_\_\_\_/\_\_\_\_/\_\_\_\_ TO \_\_\_\_/\_\_\_\_/\_\_\_\_

AUTO MAKE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ LICENSE PLATE & STATE \_\_\_\_\_

**EMERGENCY CONTACT** \_\_\_\_\_ REALATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

**PERSONAL REFERENCE** \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_

BANK \_\_\_\_\_ CHECKING ACCT. # \_\_\_\_\_ BALANCE \$ \_\_\_\_\_

SAVINGS ACCT. # \_\_\_\_\_ BALANCE \$ \_\_\_\_\_ OTHER ACCT. \_\_\_\_\_ BALANCE \$ \_\_\_\_\_

HAVE YOU OR PROPOSED OCCUPANTS EVER:

FILED FOR BANKRUPTCY? ( ) YES ( ) NO  
BEEN EVICTED FROM ANY TENANCY? ( ) YES ( ) NO  
REFUSED TO PAY RENT WHEN DUE? ( ) YES ( ) NO  
BEEN CONVICTED OF A FELLONY? ( ) YES ( ) NO

DO YOU OR PROPOSED OCCUPANTS:  
HAVE A WATERBED? ( ) YES ( ) NO  
SMOKE? ( ) YES ( ) NO

Applicant understands and agrees: (I) this is an application to rent only and does not guarantee that applicant will be offered the Premises and (II) Landlord or Manager or Agent may accept more than one application for the Premises and, using their sole discretion, will select the best qualified applicant.

Everything that I have stated in this Application is true and correct to the best of my knowledge. I understand that Beccaria & Associates will retain this Application whether or not it is approved. I authorize Beccaria & Associates to (a) verify all information contained in this Application, (b) obtain a credit report and/or investigative report on myself, and (c) to verify that I have no criminal record. I understand that such information may be derived in whole or in part from Experian, Equifax, and/or Contemporary Information Corporation.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_