

Rental Application - Bungalow on Caracas

Applicant Information

Name:		Date of birth:
SSN:	Phone:	Work Phone:
Drivers license number / State:		License Plate No. / State:

Address

Current Address:		
City:	State:	Zip:
Own Rent (Please Circle)	Monthly Obligation:	Dates at address:
Landlord Name:		Landlord Phone:
Previous Address:		
City:	State:	Zip:
Own Rent (Please Circle)	Monthly Obligation:	Dates at address:
Landlord Name:		Landlord Phone:

Additional Occupants: (If over 18 years of age please complete separate application)

Full Name:	Relationship:
Full Name:	Relationship:
Full Name:	Relationship:
Full Name:	Relationship:

Vehicle Information:

Year:	Make:	Model:	Color:	Plate No. / State
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Employment Information:

Current employer:		How long?
Employer address:		
City:	State:	Zip Code:
Position:	Hourly Salary (Please circle)	Annual income:
Supervisor Name:	Phone:	E-mail:
Previous employer:		How long?
Employer address:		
City:	State:	Zip Code:

Position:	Hourly Salary (Please circle)	Annual income:
Supervisor Name:	Phone:	E-mail:
Additional Income (Optional)		
Miscellaneous		
Pets:	Cat Dog (Please Circle)	Breed: Weight:
	Cat Dog (Please Circle)	Breed: Weight:
Pets Other:	Type:	
List any water filled furniture:		
Do You Smoke?	Yes No (Please Circle)	
Have you ever:	Filed for bankruptcy:	Yes No (Please Circle)
	Been evicted:	Yes No (Please Circle)
	Been sued:	Yes No (Please Circle)
	Been convicted of a crime:	Yes No (Please Circle)
Explain any "yes" above:		
Emergency Contact		
Name of a person not residing with you:		
Address:		
City:	State:	ZIP Code: Phone:
Relationship:		
References		
Name:	Address:	Phone:
<p>By signing below, I authorize verification of the information provided in this application from my credit sources, credit bureaus, current and previous landlords, employers and personal references. This permission will survive the expiration of my tenancy.</p> <p>I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any material false or incomplete statements in this application.</p>		
Signature of applicant:		Date:
Signature of co-applicant:		Date:

This Section To Be Completed by Property Manager

Address of residence:

Unit #:

City:

State:

Zip:

Rental Term / Number of Months:

From:

To:

Amounts Due Prior to Occupancy:

Monthly Rent:

Promotion / Credits:

Security Deposit:

Other:

Total Due: