

APPLICATION TO RENT

Each Individual Occupant Who is Responsible for Rent Payment MUST Complete a Separate Application Form For Each Adult Occupant

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CALL NTN For Tenant Screening & Credit Reports!

1-800-228-0989 www.Landlord.com/ntn_credit.htm

LAST NAME		FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER	
DATE OF BIRTH	DRIVER'S LICENSE NO.	STATE	EMAIL ADDRESS	HOME PHONE NUMBER () () ()		CELL NUMBER () () ()	
1 PRESENT HOME ADDRESS				CITY	STATE	ZIP CODE	
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. () () ()	
2 PREVIOUS HOME ADDRESS				CITY	STATE	ZIP CODE	
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. () () ()	
3 NEXT PREVIOUS HOME ADDRESS				CITY	STATE	ZIP CODE	
LENGTH OF TIME		STATE REASON FOR MOVING		LANDLORD NAME		LANDLORD PHONE NO. () () ()	

DESCRIBE EVERY PERSON WHO WILL OCCUPY THE PREMISES:	NAME	NAME	NAME
	NAME	NAME	NAME

WILL YOU HAVE ANY PETS? (Y/N)	IF YES, PLEASE DESCRIBE	WILL YOU HAVE ANY LIQUID FILLED FURNITURE? (Y/N)	IF YES, PLEASE DESCRIBE
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Present Occupation	Employer Name	Supervisor Name:
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How long with this Employer	Phone number () () ()	Employer address
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Prior Occupation	Employer Name	Supervisor Name:
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How long with this Employer	Phone number () () ()	Employer address
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Current Gross Income \$ PER <input type="checkbox"/> Week <input type="checkbox"/> Year <input type="checkbox"/> Month	Name of your Bank	Branch or Address	<input type="checkbox"/> Checking	Account Number
			<input type="checkbox"/> Savings	

Please List ALL of your Financial Obligations (If More Creditors Use Additional Sheet of Paper)			
Name of Creditor	Address	Phone Number () () ()	Monthly Payment Amt.

In Case of Emergency, Call: 1.	Phone: () () ()	City/St:	Relationship:
In Case of Emergency, Call: 2.	Phone: () () ()	City/St:	Relationship:
Personal Reference: 3.	Phone: () () ()	City/St:	Relationship:
Personal Physician: 4.	Phone: () () ()	City/St:	Relationship:

List ALL Automobiles and any Other Vehicles:	1. Make	Model	Year	License #
2. Make	Model	Year	License #	OTHER

Have you ever filed for bankruptcy? IF YES, DATE BK FILED	Have you ever been evicted or asked to move? (Please Explain)
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Credit and Reference AUTHORIZATION

Applicant represents that all the above statements are true and correct and hereby authorizes landlord/agent to verify the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request. Landlord/Agent received a payment of \$ _____ which will be used to verify Applicant's credit history and other background information. The amount charged is itemized as follows:

1. Actual cost of credit report, including any eviction search, and/or other verifying reports:	\$ _____
2. Landlord/Agent cost to process and screen applicant's supplied information:	\$ _____
3. TOTAL FEE charged (not to exceed any state mandated maximum):	\$ _____

The undersigned makes application to rent housing accommodations designated as:

Address of: _____ Apt. No. _____ City/State _____

the rental for which is \$ _____ per Month Week Other _____ and upon approval of this application agrees to sign a rental or lease agreement and to pay all sums due, including required deposits, before occupancy.

Date: _____ Signature of Applicant: _____