

PRINTABLE RENTAL FORM

APPLICANT INFORMATION

Name: APPLICANT'S NAME

Date of Birth: APPLICANT'S DATE OF BIRTH

Phone: APPLICANT'S PHONE NUMBER

Current Address: APPLICANT'S STREET ADDRESS, APPLICANT'S CITY, APPLICANT'S STATE, APPLICANT'S ZIP CODE

Email: EMAIL ADDRESS

Driver's License: DRIVER'S LICENSE NUMBER

Monthly Rent: \$ CURRENT MONTHLY RENT AMOUNT

Duration: DURATION

Landlord's Name: LANDLORD'S NAME

Previous Address: APPLICANT'S PREVIOUS STREET ADDRESS, APPLICANT'S PREVIOUS CITY, APPLICANT'S PREVIOUS STATE, APPLICANT'S PREVIOUS ZIP CODE

Monthly Rent: \$ MONTHLY RENT AMOUNT

Duration: DURATION

Landlord's Name: LANDLORD'S NAME

PROPOSED OCCUPANTS

LIST DOWN OTHER OCCUPANTS' NAMES AND YOUR RELATIONSHIP TO THEM

Do you smoke?

Do you smoke?

Pets Allowed?

Pets Allowed?

EMPLOYMENT INFORMATION

Current employer: EMPLOYER'S NAME Title: JOB TITLE

Employer's address: EMPLOYER'S STREET
ADDRESS,

EMPLOYER'S CITY, APPLICANT'S Tenure: TENURE
STATE, APPLICANT'S ZIPCODE NUMBER

Phone: EMPLOYER PHONE

Email: EMPLOYER EMAIL ADDRESS

Gross Income: \$GROSS INCOME AMOUNT

REFERENCES

LIST OF REFERENCES AND THEIR EMAIL ADDRESSES

FINANCIAL INFORMATION

Bank Name: BANK'S NAME Branch: BANK'S BRANCH

Contact Number: BANK CONTACT NUMBER

Checking Account No.: ACCOUNT NO.

Credit Reference: NAME OF REFERENCE

Address: ADDRESS OF REFERENCE

Contact Number: PHONE NUMBER

CONSENT

I/We, Afton Austin , justify that the information provided in this Application is true and correct to the best of my/our knowledge. Any false information provided by me/us shall be grounds for rejection of this Application or termination of Lease Agreement with the Landlord or the Property Manager. I/We hereby authorize the Landlord, LANDLORD'S NAME, to review my/our credit and criminal history and perform a background check to ensure the validity of the abovementioned confidential information. I/We further authorize banks, creditors, credit card companies, references, and all other persons or entities to provide the Landlord any and all information pertaining to my/our financial information. I/We acknowledge that incorrect or incomplete information shall be grounds for the rejection of this Application.

Applicant's Signature: _____

Date: _____