



RENTAL APPLICATION

This page and the following items must accompany this application:

- **NON-REFUNDABLE APPLICATION FEE OF \$60.00 CASH PER PERSON \$100 MARRIED**

(Fee is per applicant, all occupant over 18 must have a processed application)

Address applying for: _____

Property manager: _____

Direct Phone: (____) _____

The preferred date for occupancy is: _____

The preferred term of lease is _____ months. (Minimum 12 unless otherwise approved by management).

Do you have pets? ___ Yes ___ No (If yes please complete pet application)

If this application **is not approved** within 48 hours (weekends & holidays excluded), the Good Faith Deposit will be refunded in full.

If this application **is approved** the Good Faith Deposit shall be applied towards the security deposit. If after approval, applicant fails to enter into a Lease/Rental Agreement for any reason, the entire Good Faith Deposit shall be forfeited.

I hereby give authorization contained on this application. I also authorize a full background check, including but not limited to credit, bank, employment, eviction, and criminal background. I also give authorization to contact any persons or companies listed on this application.

I/we further authorize Vintage Real Estate Services to provide copies of my/our credit report to parties who have an expressed interest in the performance of my/our obligations under any lease for the premises that I/we would execute. For purposes of this consent, "personal information" may include, but is not limited to, use of my/our Social Security Number(s), or banking account information. This Personal Information Authorization should be signed by all persons whose names appear on the lease application for the premises address shown above.

I affirm the information on this application is true, accurate, complete and correct. I agree if this is not so, my application may be denied and/or my lease will be held in default and I may be subject to eviction.

Signature _____ Date _____

Signature _____ Date _____

ALL APPLICATIONS MUST BE ACCOMPANIED BY:

- CASH APPLICATION FEE
- GOOD FAITH DEPOSIT IN CERTIFIED FUNDS
- SOCIAL SECURITY NUMBERS FOR ALL ADULT APPLICANTS
- SIGNATURES FOR ALL ADULT APPLICANTS

INCOMPLETE APPLICATION CANNOT BE PROCESSED!!!
UNLESS APPROVED OTHERWISE BY PROPERTY MANAGER

Where did you hear about this rental? _____

Were you referred by a Realtor? ___ Yes ___ No (If yes please complete below)

Realtor name: _____

Office name: _____

Address: _____

Phone: (____) _____

APPLICANT INFORMATION (Please attach copies of applicant and co-applicant drivers license to application)

Applicant Full Name: _____ Cell: (____) _____

Home Phone: (____) _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

Co-Applicant Name: _____ Cell: (____) _____

Home Phone: (____) _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

OCCUPANTS OTHER THAN LISTED ABOVE (Including dependents)

1st Occupant Name: _____ Cell : (____) _____

Relation: _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

2nd Occupant Name: _____ Cell : (____) _____

Relation: _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

3rd Occupant Name: _____ Cell : (____) _____

Relation: _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

4th Occupant Name: _____ Cell : (____) _____

Relation: _____ Work: (____) _____

Date of Birth: _____ SS#: _____

Email Address: _____

Driver License #: _____ State Issued: _____

****Note: If you have more than 4 occupants please list on the back of this page****

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you ever declared bankruptcy in the past seven (7) years? Yes _____ No _____
Have you ever been evicted from a rental residence? Yes _____ No _____
Have you had two or more late rental payments in the past year? Yes _____ No _____
Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Your Status: Full Time _____ Part Time _____ Student _____ Unemployed _____ Retired _____
Employer: _____ Employed As: _____
Dates Employed: _____ Salary: \$ _____ Per Month
Supervisor Name: _____ Phone: (_____) _____

If employed by above less than 3 years, give name and phone for previous employers or schools

Your Status: Full Time _____ Part Time _____ Student _____ Unemployed _____
Employer: _____ Employed As: _____
Dates Employed: _____ Salary: \$ _____ Per Month
Supervisor Name: _____ Phone: (_____) _____

If you have other sources of income that you would like us to consider, please list income, source and or child support income unless you want us to consider it in the application.

Amount: \$ _____ Source/Contact: _____
Name: _____ Phone: (_____) _____

CO-APPLICANT EMPLOYMENT HISTORY

Your Status: Full Time _____ Part Time _____ Student _____ Unemployed _____ Retired _____
Employer: _____ Employed As: _____
Dates Employed: _____ Salary: \$ _____ Per Month
Supervisor Name: _____ Phone: (_____) _____

If employed by above less than 3 years, give name and phone for previous employers or schools

Your Status: Full Time _____ Part Time _____ Student _____ Unemployed _____
Employer: _____ Employed As: _____
Dates Employed: _____ Salary: \$ _____ Per Month
Supervisor Name: _____ Phone: (_____) _____

If you have other sources of income that you would like us to consider, please list income, source and or child support income unless you want us to consider it in the application.

Amount: \$ _____ Source/Contact: _____
Name: _____ Phone: (_____) _____

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

****If Co-Applicant has different addresses (current or past) please note on the back****

Current Address: _____

City, State Zip: _____

Rent: \$ _____ Move In (MM/YY): _____

Reason for leaving: _____ Move Out (MM/YY): _____

Owner/Agent: _____ Phone: () _____

Please provide fax number if a fax inquiry is required for rent reference. Fax: () _____

Current Address: _____

City, State Zip: _____

Rent: \$ _____ Move In (MM/YY): _____

Reason for leaving: _____ Move Out (MM/YY): _____

Owner/Agent: _____ Phone: () _____

Please provide fax number if a fax inquiry is required for rent reference. Fax: () _____

Current Address: _____

City, State Zip: _____

Rent: \$ _____ Move In (MM/YY): _____

Reason for leaving: _____ Move Out (MM/YY): _____

Owner/Agent: _____ Phone: () _____

Please provide fax number if a fax inquiry is required for rent reference. Fax: () _____

Give 3 References

Name: _____ Phone: () _____

Relation: _____

Name: _____ Phone: () _____

Relation: _____

Name: _____ Phone: () _____

Relation: _____

Co-Applicant

Name: _____ Phone: () _____

Relation: _____

Name: _____ Phone: () _____

Relation: _____

Name: _____ Phone: () _____

Relation: _____