Application For Residency

FULL NAME (LAST) _____(FIRST)_____(MI)_____
DATE OF BIRTH _____SOCIAL SECURITY # _____
DRIVER'S LICENSE # _____STATE _____
OCCUPATION _____ANNUAL GROSS INCOME _____
CO-APPLICANT (LAST)_____(FIRST)_____(MI)_____
DATE OF BIRTH _____SOCIAL SECURITY # _____

VEHICLES:	TYPE	COLOR	MAKE	STATE	LICENSE #
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

LIST OTHERS WHO WILL RESIDE IN APARTMENT ON A PERMANENT BASIS:

NAME: _____RELATIONSHIP TO APPLICANT:_____AGE:_____
NAME: _____RELATIONSHIP TO APPLICANT: _____AGE: _____
NAME: _____RELATIONSHIP TO APPLICANT: _____AGE: _____

APPLICANT INFORMATION

PRESENT ADDRESS:
STREET: _____ APARTMENT #:_____
CITY: _____STATE: _____ZIP: _____PHONE #: _____
RENT OR OWN? _____DATES: _____MONTHLY PAYMENT: _____
LANDLORD/LENDER: _____STREET: _____
CITY: _____STATE: _____PHONE # TO LANDLORD: _____

PREVIOUS ADDRESS:
STREET: _____APARTMENT #:_____
CITY: _____STATE: _____ZIP: _____PHONE #: _____
RENT OR OWN? _____DATES: _____MONTHLY PAYMENT: _____
LANDLORD/LENDER: _____STREET: _____
CITY: _____STATE: _____PHONE # TO LANDLORD: _____

CURRENT EMPLOYER:
NAME: _____STREET: _____
CITY: _____STATE: _____ZIP: _____PHONE #: _____
EMPLOYMENT DATE: _____POSITION: _____SALARY: _____SUPERVISOR:_____

CO-APPLICANTS EMPLOYER:
NAME: _____STREET: _____
CITY: _____STATE: _____ZIP: _____PHONE #: _____
EMPLOYMENT DATE: _____POSITION: _____SALARY: _____SUPERVISOR:_____

PREVIOUS EMPLOYER:
NAME: _____STREET: _____
CITY: _____STATE: _____ZIP: _____PHONE #: _____
EMPLOYMENT DATE: _____POSITION: _____SALARY: _____SUPERVISOR:_____

OTHER INCOME:
TYPE OF OTHER INCOME: _____SOURCE/BANK: _____AMOUNT PER MONTH: $_____
TYPE OF OTHER INCOME: _____SOURCE/BANK: _____AMOUNT PER MONTH: $_____

RELATIVES/EMBERGENCY CONTACT (NOT RESIDING WITH YOU):
(1) NAME: _____RELATIONSHIP: _____PHONE NUMBER: _____
STREET: _____CITY: _____STATE: _____
(2) NAME: _____RELATIONSHIP: _____PHONE NUMBER: _____
STREET: _____CITY: _____STATE: _____

PET INFORMATION (MUST BE UNDER 25 ILBS!)
TYPE: _____BREED: _____WEIGHT:_____
KEEPING OF PET REQUIRES CONSENT OF MANAGEMENT, PAYMENT OF APPLICABLE FEES/DEPOSITS, AND EXECUTION OF PET ADDENDUM. HANDICAPPED ASSISTANCE ANIMALS USED FOR DISABILITIES ARE NOT CONSIDERED PETS.

How did you hear about our property?_____

The civil Rights Act of 1968, as amended by the Fair Housing Amendments Act of 1988, prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status or national origin. The Federal Agency, which administers compliance with this law, is the U.S. Department of Housing and Urban Development.

This is to inform you that as part of our procedure for processing your application, an Investigative Consumer Report may be prepared whereby information's obtained through personal interviews with your landlord, employer, or others with whom you are acquainted. This inquiry includes information as to your character general reputation, personal characteristics, mode of living, and credit report. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation (Fair Credit Reporting Act). I/We hereby agree, in the event of the approval of this application, to execute a lease in accordance with the terms set forth in this rental application and my/our rental liability shall commence on _____ 20_____, pursuant to the terms of the lease. That if I/We fail to sign the lease and/or pay agreed rental, Security deposit, utility fees, or other required charges as shown in this rental applications the $___ holding fees accompanying this applications shall be retained by landlord as liquidated damages and I/We agree to this amount being retained by landlord as a reasonable estimate of actual damages to landlord if I/We failed to perform as stated above after approval. I/We also do not believe the loss of this holding fee is an unfair trade practice if I/We fail to perform as stated above after approval. I/We understand that the holding fees accompanying this application are non-refundable. Owner and/or agent for the owner reserves the right to reject this application and to and refuse possession of the above-mentioned accommodation. I/We have read the forgoing; certify that the information herein is TRUE and CORRECT, that this application is submitted for the purpose of inducing approval of this application in my/our behalf. Any "yes" or "no" question unanswered shall be considered a "yes".

HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY OR "NO CONTEST"TO ANY FELONY OR MISDEMEANOR?
YES [ ] NO [ ]

HAVE YOU EVER BEEN CONVICTED OF OR PLED GUILTY OR "NO CONTEST" TO A SEXUAL OFFENSE?
YES [ ] NO [ ]
IF YES, PLEASE EXPLAIN, PROVIDING THE LOCATION, DATE AND NATURE OF THE OFFENSE: _____
_____

BY SIGNING THIS APPLICATION, YOU DECLARE THAT ALL OF YOUR RESPONSES ARE TRUE AND COMPLETE AND AUTHORIZE AGENT OF THE LESSOR TO VERIFY THIS INFORMATION REFERENCES, AND CREDIT RECORDS, AND PERFORM A CRIMINAL BACKGROUND CHECK. ANY FALSE STATEMENT ON THIS APPLICATION CAN LEAD TO REJECTION OF YOUR APPLICATION OR IMMEDIATE TERMINATION OF YOUR LEASE. It is acknowledged and agreed that during the tenancy all persons occupying the premises will be legally residing within the United States.

_____	_____	_____
SIGNATURE	PRINT NAME	DATE

_____	_____
SIGNATURE	PRINT NAME

EQUAL HOUSING OPPORTUNITY