

RENTAL APPLICATION FOR RESIDENTS AND OCCUPANTS

Any Occupant 18 years old or older must submit a separate application

REQUESTED PROPERTY

Complex:	1BR 2BR 3BR <i>(circle one)</i>
Requested Move-in Date:	Requested Unit:

APPLICANT INFORMATION

Full Name as shown on ID:		
Nickname (what should we call you?):		SSN:
Former Last Names (maiden and married):		
Driver's License #:	Driver's License State:	Date of birth:
Address as shown on ID:		
City:	State:	ZIP Code:
Email Address:		
Sex:	Marital Status:	Home phone:
Are you a U.S. Citizen?	Do you or any occupant smoke?	Cell phone:
Have you ever filed for Bankruptcy?	Have you ever been evicted?	
Have you ever intentionally refused to pay rent when due?		
Have you ever been arrested for any illegal activity (other than minor traffic offences)?		

RESIDENCE HISTORY

Current Home Address (where you live now):		
City:	State:	ZIP Code:
Rent or Own?	How long?	Current rent:
Owner, Landlord or Manager's name:		
Phone:	Fax:	Email:
Date moved in:	Reason for leaving:	
Previous Address:		
City:	State:	ZIP Code:
Rent or Own?	How long?	Rent Amount:
Date moved in:	Date moved out:	
Reason for leaving:		
Owner, Landlord or Manager's name:		
Phone:	Fax:	Email:

EMPLOYMENT INFORMATION

Current employer:		
Employer address:		
City:	State:	ZIP Code:
Phone:	Fax:	Email:
Position:	Start Date:	
Pay:	Hourly Daily Weekly Monthly <i>(circle one)</i>	Gross Pay?

Continued on Reverse

Spouse employer:		
Employer address:		
City:	State:	ZIP Code:
Phone:	Fax:	Email:
Position:	Start Date:	End Date
Pay:	Hourly Daily Weekly Monthly <i>(circle one)</i>	Gross Pay?
OTHER OCCUPANTS		
Name:		Relationship:
Date of birth:	SSN:	Sex:
Name:		Relationship:
Date of birth:	SSN:	Sex:
Name:		Relationship:
Date of birth:	SSN:	Sex:
Name:		Relationship:
Date of birth:	SSN:	Sex:
ANIMALS (OWNED BY ANY OCCUPANT)		
Kind:	Breed:	Weight:
Kind:	Breed:	Weight:
<i>**Ask about our Pet Policy**</i>		
AUTOMOBILES (INCLUDING COMPANY CARS)		
Make:	Model:	Year:
Color:	Tag:	State:
Make:	Model:	Year:
Color:	Tag:	State:
Make:	Model:	Year:
Color:	Tag:	State:
EMERGENCY CONTACT		
Name of a relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
THANK YOU		
Thank you for applying with us! Who can we thank for referring you? <i>(circle one or more)</i>		
Friend/Family? Newspaper? Internet? Yellow Pages? Signs/Banners? Other? _____		
AUTHORIZATION		
Please be aware that the information on this application will be submitted to obtain Credit History, Rental History, Criminal History, and Employment History. This information will be used to determine whether or not your application is accepted. Your signature certifies that the information on this application is true and complete and authorizes Heritage Company to process this application. Once this application is processed it becomes part of the lease agreement. If at anytime it is determined that false information was submitted then this Lease becomes null and void and applicant will have 10 days to vacate the premises.		
Signature of applicant:		Date: