

Application for Residency At:	Screening Fee:	How did you hear about us? Print: Apt Guide Apt Blue Book For Rent
Unit # If Available:	Projected Tenant Rent Amount: \$	Internet: Apartments.com Rent.com pchawa.org Sign Referral Other:

Applicant Name:	SSN:	DOB:
Current Address:	City	State Zip
Current Phone:	Monthly Rent \$	Own <input type="checkbox"/> Rent <input type="checkbox"/>
Apartment/Landlord Name	Phone Number	From To
Other Occupant Name:	SSN:	DOB: Relationship:
Other Occupant Name:	SSN:	DOB: Relationship:
Other Occupant Name:	SSN:	DOB: Relationship:
Other Occupant Name:	SSN:	DOB: Relationship:

Applicant Prior Address:	City	State	Zip
Monthly Rent or Payment Amount:	\$	Own <input type="checkbox"/>	Rent <input type="checkbox"/>
Landlord or Apartment Community Name:			
Phone Number	How Long (Mo./Day/Yr.)	From	To

Applicant Current Employer:			
Employer Address:			
Employer Phone:			
Title:	Hire Date:		
Monthly Salary:	\$	Supervisor Name:	

Applicant Previous Employer:			
Employer Address:			
Employer Phone:			
Title:	Hire Date:	End Date:	
Monthly Salary:	\$	Supervisor Name:	

Spouse Current Employer:			
Employer Address:			
Employer Phone:			
Title:	Hire Date:		
Monthly Salary:	\$	Supervisor Name:	

Spouse Prior Employer:			
Employer Address:			
Employer Phone:			
Title:	Hire Date:	End Date:	
Monthly Salary:	\$	Supervisor Name:	

Applicant Other Income:	\$	Source:	
Applicant Bank:		Account Type:	Checking <input type="checkbox"/> Savings <input type="checkbox"/>

Spouse Other Income:	\$	Source:	
Spouse Bank:		Account Type:	Checking <input type="checkbox"/> Savings <input type="checkbox"/>

If different name previously used, please list name here.

Have you or anyone on this application ever used a different name? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you or anyone on this application ever been evicted? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you or anyone on this application ever been convicted of a crime or felony? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Date of Conviction:	State and County of Conviction:
Have you or anyone on this application ever refused to pay rent? Yes <input type="checkbox"/> No <input type="checkbox"/>	Have you or anyone on this application ever filed bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/>

Nearest Relative Name:	Phone:	Relationship:
Emergency Contact Name:	Phone:	Relationship:
Local Friend Name:	Phone:	

Animal/Pet	Yes <input type="checkbox"/> No <input type="checkbox"/>
Animal/Pet Species & Breed:	Maximum weight at full growth: Color:
Animal/Pet Name:	Male <input type="checkbox"/> Female <input type="checkbox"/>

Initial I understand that I acquire no rights in an apartment until I sign this application AND provide a holding fee in the amount of \$\_\_\_\_\_. Upon approval of this residency application and signing of a Rental/Lease Agreement, this fee will be credited against my deposit and/or the first month rent. In consideration for the landlord holding apartment #\_\_\_\_\_ for me, I hereby waive all rights to the return of the holding fee and the fee shall be retained as liquidated damages in the event I choose not to enter into the Rental/Lease Agreement after being approved for tenancy. In the event this application for tenancy is not accepted, the holding fee shall be returned to me, after thirty days of notice of the denial of residency.

Initial In compliance with state and federal laws, this is to inform you that a consumer investigation involving statements made on this application is being initiated. This investigation may involve obtaining information regarding your character, general reputation, credit, mode of living and criminal background. You have the right to dispute the information reported. If this application is denied because of credit history, you may obtain a copy of your credit report from the credit reporting agency. The apartment community, landlord, or owner has the undersigned's permission to release information found in screening for any lawful purpose associated with the tenancy of the premises.

Initial The undersigned authorizes the apartment community, landlord or owner to obtain credit reports, character information, verification of rental history, employment history, bank information, public records and personal references as necessary to verify all information set forth in this application or to fully investigate results returned from consumer reports.

Initial I certify to the best of my knowledge all statements in this application are true and correct. I understand that false, misleading or incomplete information can be grounds for denial of tenancy or for eviction.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Landlord/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_