

RENTAL APPLICATION

\$20.00 Application Fee to cover background check (cash or money order please)

UNIT INFORMATION

DATE OF APPLICATION: _____ UNIT APPLIED FOR: _____ GARAGE #: _____

MONTHLY RENT: \$ _____ DEPOSIT: \$ _____ MOVE-IN DATE: _____ LEASE TERM: _____

** Money Orders, Cashiers Checks, or Personal Checks are accepted. Please do NOT pay in Cash for rent. **

** Application Fee and Holding Fee must be paid by separate checks. **

How did you hear about this property? _____

What is the primary reason you chose this property? _____

PERSONAL INFORMATION

1. TENANT'S NAME: _____ SS#: _____
First Middle Last Maiden

2. SPOUSE'S NAME: _____ SS#: _____
First Middle Last Maiden

CURRENT STREET ADDRESS: _____ Apt # or PO Box #: _____

CITY: _____ STATE: _____ ZIP CODE: _____

IN THE PAST 10 YEARS, WHAT OTHER STATES HAVE YOU LIVED IN? _____

HOW LONG AT CURRENT ADDRESS: _____ RENT/MORTGAGE AMOUNT: _____

REASON FOR LEAVING: _____

HOME PHONE: _____ WORK PHONE: _____ CELL PHONE: _____

E-MAIL ADDRESS: _____

BIRTHDATE: 1. _____ 2. _____

DRIVER'S LICENSE #: 1. _____ 2. _____

(PLEASE PROVIDE A COPY OF DRIVER'S LICENSE OR AN ALTERNATIVE PHOTO I.D. FOR EACH APPLICANT.)

NAMES OF ANY OTHERS WHO WILL RESIDE IN THE APARTMENT, THEIR AGE, BIRHTDATE, AND RELATIONSHIP TO YOU:

- 1. _____
- 2. _____
- 3. _____
- 4. _____

VEHICLE 1: (MAKE, MODEL, YEAR, COLOR, LICENSE NUMBER)

VEHICLE 2: (MAKE, MODEL, YEAR, COLOR, LICENSE NUMBER)

PETS ARE NOT PERMITTED AT THIS PROPERTY. INITIALS: _____

SMOKING IS NOT PERMITTED INSIDE THIS PROPERTY. INITIALS: _____

BRINGING A WATERBED? YES _____ NO _____ ** If yes, proof of waterbed insurance is required. **

REFERENCES:

CURRENT LANDLORD: _____

LANDLORD'S ADDRESS: _____ PHONE: _____

PREVIOUS ADDRESS: _____

PREVIOUS LANDLORD: _____ PHONE: _____

PREVIOUS LANDLORD ADDRESS: _____

HAVE YOU EVER BEEN GIVEN A NOTICE OF EVICTION, LEASE TERMINATION, NON-RENEWAL OF LEASE, OR BEEN SUED FOR NON-PAYMENT OF AMOUNTS CLAIMED BY LANDLORD? YES _____ NO _____

IF YES, PROVIDE DETAILS: _____

PERSONAL REFERENCE:

NAME: _____ RELATIONSHIP: _____
ADDRESS: _____ PHONE: _____

EMERGENCY CONTACT (SOMEONE WHO WILL NOT BE LIVING WITH YOU IN THE APARTMENT):

NAME: _____
ADDRESS: _____

CURRENT EMPLOYMENT INFORMATION:

1. EMPLOYER: _____ HOW LONG EMPLOYED: _____
ADDRESS: _____ PHONE: _____
SUPERVISOR: _____ PHONE: _____
YOUR POSITION: _____ ARE YOU SUBJECT TO TRANSFER: _____
GROSS MONTHLY INCOME: _____ NET MONTHLY INCOME: _____
(PLEASE BE PREPARED TO SUPPLY A COPY OF YOUR MOST RECENT PAYCHECK OR PAY STUB.)

2. EMPLOYER: _____ HOW LONG EMPLOYED: _____
ADDRESS: _____ PHONE: _____
SUPERVISOR: _____ PHONE: _____
YOUR POSITION: _____ ARE YOU SUBJECT TO TRANSFER: _____
GROSS MONTHLY INCOME: _____ NET MONTHLY INCOME: _____
(PLEASE BE PREPARED TO SUPPLY A COPY OF YOUR MOST RECENT PAYCHECK OR PAY STUB.)

OTHER INCOME SOURCE: _____
AMOUNT: \$ _____ HOW OFTEN RECEIVED: _____

PREVIOUS EMPLOYER: _____ HOW LONG EMPLOYED: _____
ADDRESS: _____ PHONE: _____
REASON FOR LEAVING: _____

CHECKING ACCOUNT? YES _____ NO _____

BANK NAME & LOCATION: _____

SAVINGS ACCOUNT? YES _____ NO _____

BANK NAME & LOCATION: _____

CREDIT INFORMATION:

CREDITOR: _____ PHONE: _____
ADDRESS: _____ MONTHLY PAYMENT: \$ _____

CREDITOR: _____ PHONE: _____
ADDRESS: _____ MONTHLY PAYMENT: \$ _____

DO YOU PAY ALIMONY OR CHILD SUPPORT PAYMENTS? YES _____ NO _____

IF YES, AMOUNT PER MONTH: \$ _____

HAVE YOU EVER BEEN FOUND GUILTY OF, BEEN CONFICTED OF, OR PLEAD GUILTY TO A FELONY OR A MISDEMEANOR? YES _____ NO _____ IF YES, DESCRIBE: _____

HAVE YOU EVER FILED BANKRUPTCY? YES _____ NO _____ IF YES, WHEN: _____

IT IS SUNSET HEIGHTS APARTMENTS/PRIME PROPERTY'S POLICY TO CHECK ALL APPLICANTS AND PROSPECTIVE OCCUPANTS AGAINST THE SEX OFFENDER REGISTRY AND TO DENY OCCUPANCY TO SEX OFFENDERS, INCLUDING ANY INDIVIDUALS REQUIRED TO REGISTER AS SEX OFFENDERS.

SUNSET HEIGHTS APARTMENTS/PRIME OKOBOJI PROPERTY AND AFFILIATES MAY USE E-MAIL TO CORRESPOND WITH TENANTS AT VARIOUS TIMES FOR A VARIETY OF REASONS. ADDRESSES WILL NOT BE SOLD OR PROVIDED TO THIRD PARTIES.

I, THE UNDERSIGNED, GIVE MY PERMISSION TO SUNSET HEIGHTS APARTMENTS/PRIME OKOBOJI PROPERTY TO VERIFY ALL INFORMATION ON THIS APPLICATION, AND I GIVE MY PERMISSION TO ANYONE SO CONTACTED TO RELEASE INFORMATION TO SUNSET HEIGHTS APARTMENTS/PRIME OKOBOJI PROPERTY. I UNDERSTAND THAT THIS APPLICATION WILL BE FULLY CHECKED FOR ACCURACY.

I UNDERSTAND AND AGREE THAT AN APPLICATION FEE IN THE AMOUNT OF \$20.00 IS REQUIRED WITH THIS APPLICATION. IF MY APPLICATION IS NOT APPROVED, I UNDERSTAND AND AGREE THAT I WILL FORFEIT THE APPLICATION FEE.

I UNDERSTAND AND AGREE THAT AFTER THE LEASE HAS BEEN SIGNED BY BOTH PARTIES, THE HOLDING FEE WILL BE TRANSFERRED TO A TRUST ACCOUNT, WHERE IT WILL BE HELD BY THE LANDLORD AS A SECURITY DEPOSIT FOR THE DURATION OF MY TENANCY.

I, THE UNDERSIGNED, ATTEST THAT I HAVE READ THIS APPLICATION IN ITS ENTIRETY AND THAT ALL INFORMATION PROVIDED BY ME ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. IF INFORMATION ON THE APPLICATION IS FOUND TO BE FALSE PRIOR TO THE LEASE BEING SIGNED, I UNDERSTAND THAT IT WILL RESULT IN DENIAL OF MY APPLICATION. IF INFORMATION ON THE APPLICATION IS FOUND TO BE FALSE AFTER THE LEASE HAS BEEN SIGNED, I UNDERSTAND THAT IT WILL RESULT IN THE IMMEDIATE TERMINATION OF THE LEASE.

1. APPLICANT SIGNATURE DATE: _____

2. APPLICANT SIGNATURE DATE: _____

FOR OFFICE USE ONLY

COMMENTS: _____

DATE OF APPROVAL: _____ DATE OF DENIAL: _____

VERIFIED BY: _____ TITLE: _____

DATE INFORMATION ENTERED INTO COMPUTER: _____ ENTERED BY (INITIALS): _____