



APPLICATION FOR RENTAL

FOR OFFICE USE:			
Application Date: _____	Address Deposited on: _____	LL initials _____	
Move-In Date: _____	Lease Term _____	Rental Rate _____	Proration _____
Non-refundable Application Fee _____	Security Deposit _____	Pet Fee _____	Specials? _____

NOTE: All occupants over 18 must complete a separate application form. Applications with blanks will not be accepted. PLEASE PRINT.

Applicant's Name _____ SS# _____ - _____ - _____ DOB ____ / ____ / ____
(LAST) (FIRST) (M.I.)

Co-Applicant's Name _____ SS# _____ - _____ - _____ DOB ____ / ____ / ____
(LAST) (FIRST) (M.I.)

NOTE: Support documents (divorce decree, separation agreement, or court order) must be furnished to management before move-in.

Marital Status: Single Married Divorced Separated Widowed

PLEASE LIST ALL OCCUPANTS, NOT INCLUDING YOURSELF

NAME	RELATION	DOB	AGE	SS#
		/ /		/ /
		/ /		/ /
		/ /		/ /
		/ /		/ /

In the case of an emergency please notify: _____ () _____
Do you have any pets? If so, specify type: _____ Weight: _____
PLEASE NOTE THAT A PET DEPOSIT WILL BE REQUIRED PER ANIMAL

RESIDENTIAL HISTORY FOR THE LAST TWO YEARS
(Subject to verification)

Present Address (include City, State & Zip Code): _____	Rental Rate: _____	Length of Stay: _____	Reason for Leaving: _____
Present Landlord: _____			Telephone No.: _____

Previous Address (include City, State & Zip Code): _____	Rental Rate: _____	Length of Stay: _____	Reason for Leaving: _____
Present Landlord: _____			Telephone No.: _____

APPLICANT'S EMPLOYMENT FOR THE LAST TWO YEARS
(Subject to verification)

Present employer: _____	Address: _____	Pay cycle: _____	Income: _____
Length of Employment: _____	Supervisor/HR Name: _____	Supervisor/HR Number: _____	
Previous employer: _____	Address: _____	Pay cycle: _____	Income: _____
Length of Employment: _____	Supervisor/HR Name: _____	Supervisor/HR Number: _____	

CO-APPLICANT'S EMPLOYMENT FOR THE LAST TWO YEARS
(Subject to verification)

Present employer: _____	Address: _____	Pay cycle: _____	Income: _____
Length of Employment: _____	Supervisor/HR Name: _____	Supervisor/HR Number: _____	
Previous employer: _____	Address: _____	Pay cycle: _____	Income: _____
Length of Employment: _____	Supervisor/HR Name: _____	Supervisor/HR Number: _____	



OTHER INCOME INCLUDES: Alimony, child support, aid to dependent children, welfare, unemployment, social security, annuities, insurance policies, retirement benefits, pensions and other regular periodic payments. Please consult the leasing personnel for complete list of other income.

SOURCE OF OTHER INCOME	YEARLY GROSS AMOUNT	CONTACT	PHONE
1) _____	\$ _____	_____	_____
2) _____	\$ _____	_____	_____
3) _____	\$ _____	_____	_____

BANK REFERENCES

Bank/Checking _____ Acct# _____
 Bank/Savings _____ Acct# _____

OPEN CREDIT REFERENCES

CREDITOR	PAYMENT	BALANCE
_____	_____	_____
_____	_____	_____
_____	_____	_____

PERSONAL REFERENCES

NAME	ADDRESS	RELATION	TELEPHONE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

TRANSPORTATION INFORMATION

MAKE/MODEL _____ TAG# _____ COUNTY/STATE _____
 MAKE/MODEL _____ TAG# _____ COUNTY/STATE _____

I certify that the facts set forth in this APPLICATION FOR RENTAL are true, complete, and correct to the best of my knowledge and belief, and are made in GOOD FAITH. I understand that a knowing and willful false statement on this application is grounds for rejection by the rental manager. I apply to lease the above described premises on substantially the terms set forth herein. As an inducement to Apollo Associates Realty to accept this application, I warrant that all statements contained herein are true. I have been advised and understand that residency at this community entails certain income restrictions and that residency is subject to qualification. I agree that in addition to execution of a Lease Agreement that I will execute a tenant certification attesting to the information contained herein which certification will be made under the penalty of perjury. It is understood that the Application is a part of the Lease and Resident hereby affirms that the statements and information contained in the Application are true and correct and that the Resident's authority to the Landlord to obtain credit information through the use of a Credit Reporting Agency, including, but not limited to the obtaining of a Consumer Credit Report on the Resident is a continuing right agreed upon by the Resident, including, but not limited to credit verification, skip-tracing, or the collection of any delinquent accounts which the Resident may maintain with the Landlord.

The applicant certifies that within the past five years he or she has not obtained the status as an alien lawfully admitted for temporary residence in the United States pursuant to Section 245A (adjustment of status of certain aliens who resided in the United States as unlawful residents since before January 1, 1982) or Section 210A (determinations of agricultural labor shortages and admissions of additional Special Agricultural Workers) of the Immigration and Nationality Act.

A good faith deposit in the amount of \$ _____ is submitted with this application. If application is approved, this good faith deposit can be applied toward payment of applicant's security deposit of \$ _____. If for any reason management rejects this application, the good faith deposit submitted herewith will be refunded in full to applicant. Applicant may cancel this application by written notice within 72 hours and receive a full refund of the good faith deposit. If applicant cancels this application after 72 hours or fails to execute management's usual rental agreement, or refuses to occupy the premises on the agreed upon date, the good faith deposit WILL BE FORFEITED.

By execution of this application, I hereby authorize Apollo Associates Realty to make such investigations into my history as they may deem appropriate. I understand that such investigations typically include (but are not limited to) verification of employment and salary, motor vehicle record check, criminal background check, rental history and consumer credit reports.

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

IT IS THE POLICY OF APOLLO ASSOCIATES REALTY TO RENT TO QUALIFIED PERSONS REGARDLESS OF RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, HANDICAP, OR FAMILIAL STATUS, AND IN COMPLIANCE OF ALL FEDERAL, STATE AND LOCAL LAWS.

Application taken by: _____ Date: _____

Credit check by: _____ Date: _____ Approved by: _____ Date: _____