

QUAIL CREEK APARTMENTS RENTAL APPLICATION

THE INFORMATION COLLECTED BELOW WILL BE USED TO DETERMINE WHETHER YOU QUALIFY AS A TENANT. IT WILL NOT BE DISCLOSED WITHOUT YOUR CONSENT EXCEPT TO YOUR EMPLOYER(S) FOR VERIFICATION OF INCOME AND EMPLOYMENT INFORMATION, TO FINANCIAL INSTITUTIONS FOR VERIFICATION OF ASSETS, AND AS REQUIRED AND PERMITTED BY LAW. YOU DO NOT HAVE TO PROVIDE THE INFORMATION, BUT IF YOU FAIL TO DO SO, YOUR APPLICATION MAY BE DELAYED, OR REJECTED.

APPLICANT:

APPLICANT'S NAME (First, Middle, Last)	DOB	SSN	HOME PHONE
PRESENT ADDRESS	CITY	STATE, ZIP CODE	YEARS AT ADDRESS
FORMER ADDRESS	CITY	STATE, ZIP CODE	YEARS AT ADDRESS

EMAIL: _____

PRESENT LANDLORD:

_____ **PHONE:** _____

IN CASE OF EMERGENCY NOTIFY:

_____ **PHONE:** _____

EMPLOYER NAME	ADDRESS	PHONE	POSITION
PREVIOUS EMPLOYER	ADDRESS	PHONE	POSITION

CO-APPLICANT:

CO-APPLICANT'S NAME (First, Middle, Last)	DOB	SSN	HOME PHONE
PRESENT ADDRESS	CITY	STATE, ZIP CODE	YEARS AT ADDRESS
FORMER ADDRESS	CITY	STATE, ZIP CODE	YEARS AT ADDRESS

EMAIL: _____

PRESENT LANDLORD:

_____ **COMPLEX:** _____ **PHONE:** _____

IN CASE OF EMERGENCY NOTIFY:

_____ **PHONE:** _____

EMPLOYER NAME	ADDRESS	PHONE	POSITION
PREVIOUS EMPLOYER	ADDRESS	PHONE	POSITION

HOUSEHOLD COMPOSITION:

FULL NAME	RELATIONSHIP	DATE OF BIRTH

VEHICLES:

MAKE/MODEL	DESCRIPTION	YEAR	LICENSE #	STATE

NOTE: INOPERABLE VEHICLES OR ABANDONED VEHICLES WILL BE TOWED AT OWNERS EXPENSE.

APPLICANT DRIVERS LICENSE: _____

CO-APPLICANT DRIVERS LICENSE: _____

PLEASE LIST YOUR ANNUAL INCOME BY CATEGORY:

SOURCE	APPLICANT	CO-APPLICANT	TOTAL
SALARY			
OVERTIME			
COMMISSIONS/FEES/TIPS/BONUSES			
INTEREST/DIVIDENDS/RENTAL INCOME			
NOI FROM BUSINESS			
SOCIAL SECURITY/ PENSION			
UNEMPLOYMENT BENEFITS/ WORKERS COMPENSATION			
ALIMONY/CHILD SUPPORT/ WELFARE PAYMENTS			

DO YOU HAVE ANY PETS YES ____ NO _____ IF YES WHAT TYPE AND SIZE:

THE INFORMATION ABOVE IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I/WE CONCUR TO THE DISCLOSURE OF INCOME AND FINANCIAL FROM MY/OUR EMPLOYER AND FINANCIAL REFERENCES FOR PURPOSE OF INCOME AND ASSET VERIFICATION RELATED TO MY/OUR APPLICATION FOR TENANCY.

APPLICANT: _____ DATE: _____

CO-APPLICANT: _____ DATE: _____