

# Rental Application

***Application must be filled out completely. Applicants must show driver's license or other picture I.D. Along with 1 month of paycheck stubs***

***Please write in Blue or Black ink and clearly***

Date \_\_\_\_\_ 20\_\_\_\_, the undersigned hereby applies to rent the residence located at \_\_\_\_\_ from Armstrong Properties.

Rent:\$ \_\_\_\_\_ Deposit:\$ \_\_\_\_\_

## **Applicant**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Maiden \_\_\_\_\_

Date of Birth \_\_\_\_\_ Soc.Sec.# \_\_\_\_\_ Home # (\_\_\_\_) \_\_\_\_\_

Cell # (\_\_\_\_) \_\_\_\_\_ Work # (\_\_\_\_) \_\_\_\_\_

Driver's License # \_\_\_\_\_ Driver's License State \_\_\_\_\_

## **Co-Applicant**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Maiden \_\_\_\_\_

Date of Birth \_\_\_\_\_ Soc.Sec.# \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Cell # (\_\_\_\_) \_\_\_\_\_ Work # (\_\_\_\_) \_\_\_\_\_

Driver's License # \_\_\_\_\_ Driver's License State \_\_\_\_\_

## **Other Occupants** *(Those to be included on lease besides the Applicant and Co-Applicant)*

Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ SS# \_\_\_\_\_ Age \_\_\_\_\_

**Vehicles**

License Plate # \_\_\_\_\_ State \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

License Plate # \_\_\_\_\_ State \_\_\_\_\_ Make \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_

**Applicant's Information**

**Current Address:**

Street \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Landlord's Telephone (\_\_\_\_) \_\_\_\_\_

Landlord's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month & Year Moved In \_\_\_\_\_ Rent per month \$ \_\_\_\_\_

Number of Bedrooms Rented \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Do you pay? Heat ( yes, no ) Cooking Fuel ( yes, no ) Electric ( yes, no ) Water ( yes, no )

Name used for billing by: Gas & Electric Co. \_\_\_\_\_ Water Co. \_\_\_\_\_

Telephone Co. \_\_\_\_\_ For Telephone Number(\_\_\_\_) \_\_\_\_\_

**Previous Address:**

Street \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Landlord's Telephone (\_\_\_\_) \_\_\_\_\_

Landlord's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month & Year Moved In \_\_\_\_\_ Month & Year Moved Out \_\_\_\_\_ Rent per month\$ \_\_\_\_\_

**Current Employer:** \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_

Length of Time Employed \_\_\_\_\_ yrs. \_\_\_\_\_ mos. Position \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

Other source of current income? Source \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

**Previous Employer:** \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Length of Time Employed \_\_\_\_\_ yrs. \_\_\_\_\_ mos. Position \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

## **Co-Applicant's Information**

### **Current Address:**

Street \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Landlord's Telephone (\_\_\_\_) \_\_\_\_\_

Landlord's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month & Year Moved In \_\_\_\_\_ Month & Year Moved Out \_\_\_\_\_ Rent per month\$ \_\_\_\_\_

### **Previous Address:**

Street \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Landlord's Name \_\_\_\_\_ Landlord's Telephone (\_\_\_\_) \_\_\_\_\_

Landlord's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Month & Year Moved In \_\_\_\_\_ Month & Year Moved Out \_\_\_\_\_ Rent per month\$ \_\_\_\_\_

### **Current Employer:** \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_

Length of Time Employed \_\_\_\_\_ yrs. \_\_\_\_\_ mos. Position \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

Other source of current income? Source \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

### **Previous Employer** \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone(\_\_\_\_) \_\_\_\_\_

Length of Time Employed \_\_\_\_\_ yrs. \_\_\_\_\_ mos. Position \_\_\_\_\_ Monthly Income \$ \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Other Income(Social Security or Unemployment)\_\_\_\_\_amount\_\_\_\_\_

**Applicant's References – Complete information needed**

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

**Co-Applicant's References- Complete information needed**

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Address \_\_\_\_\_

Phone #: \_\_\_\_\_ Relationship \_\_\_\_\_

**In Case of Emergency Contact:**

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

**What Kind of Pet do you have:** \_\_\_\_\_

- If this Application is Accepted do you have the first month rent and deposit ( ) Yes ( ) No
- If No, how much do you have now? \$ \_\_\_\_\_
- Have you ever filed bankruptcy? ( ) Yes ( ) No
- Have you ever been involved in any judgment or other legal proceedings (Criminal, Civil or Other)? ( ) Yes ( ) No
- Have you ever been served an eviction notice or been asked to vacate a property you were renting? ( ) Yes ( ) No
- Have you ever willfully or intentionally refused to pay rent when due? ( ) Yes ( ) No
- Have you ever changed your name? ( ) Yes ( ) No

- Do you know of anything, which may interrupt your income or ability to pay rent? ( ) Yes ( ) No
- If your answer is “yes” to any of the above questions, please provide complete details on the next page.
- Is your credit good? ( ) Yes ( ) No
- Are you on Section 8 ( ) Yes ( ) No
  - If so, how many bedrooms are you approved for now? \_\_\_\_\_
  - If so, have they changed the number of bedrooms you can apply for? ( ) Yes ( ) No
    - How many? \_\_\_\_\_
  - Have you put in your 30 day notice to move? ( ) Yes ( ) No When? \_\_\_\_\_
  - Have you gone through the Movers Meeting? ( ) Yes ( ) No
    - Or when are you going to? \_\_\_\_\_
  - What are they presently paying for you now? \_\_\_\_\_
  - What is your part to pay your Landlord? \_\_\_\_\_

I have re-examined the information which I have provided on this application, and I agree that it is true and complete. I understand that providing false or incomplete information on this application shall be grounds for rejection of my application and/or immediate eviction.

**If this application is accepted, I agree to:**

- 1) Sign the Owner/Agent’s Lease Agreement and any related addendums within 3 days of the acceptance of this application;
- 2) Pay the balance of my Security Deposit in cash, certified check, cashier’s check, or money order within 3 days of the acceptance of this application;
- 1) Pay the first monthly rental installment in cash, certified check, cashier’s check, or money order prior to receiving keys or taking occupancy.

I understand that if this application is accepted and I decide not to rent the residence, my deposit will be forfeited.

I hereby authorize **Armstrong Properties**, to obtain information concerning my past and present credit, rental, or employment history, and to answer any questions in the future regarding their experience with me. I hereby authorize any of the following sources, including but not limited to (1) credit reporting agencies, (2) public or privately owned utility companies, (3) governmental housing agencies, and (4) current or past landlords, employers, or creditors, to release any said information to the above named party. I hereby release any of the above sources, their officers, agents, or employees, from any liability for damages of any kind whatsoever, whether caused by negligence or not, which may at any time result to me by reason of compliance with the above mentioned inquiry, which may include the answering of specific questions and the giving of any information concerning my present or past record.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Co-Applicant \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_  
Agent/Representative For Armstrong Properties

**\*Pets by Agreement Only\***

**\*NO WATERBEDS\***

Explanation of Questions 1-10

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

ANY OTHER INFORMATION THAT YOU FEEL WOULD BE BENEFICIAL TO APPROVING THIS APPLICATION

**AUTHORIZATION TO RELEASE**  
**INFORMATION**

Date.....

To Whom It May Concern:

I do hereby authorize **Armstrong Properties** to obtain information concerning my past and present credit, rental or employment history. I hereby authorize any of the following sources including but not limited to (1) credit reporting agencies, (2) public or privately owned utility companies. (3) Governmental housing agencies and (4) current or past landlords, employers or creditors, to release any said information to the above named party. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of any kind whatsoever, whether caused by negligence or not, which may at any time result to me by reason of compliance with the above mentioned inquires, which may include the answering of specific questions and the giving of any information concerning my present or past record.

Additionally, I give the above named party permission to copy and submit this form as needed for the purpose of processing my rental application or to continue to get information for credit collections.

Signed:

Name \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

Note: If Joint accounts, both parties must sign  
One original form must be completed by each party

Name \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_