

APPLICATION FOR RESIDENCY

****FOR OFFICE USE ONLY****

APPLICATION FEE \$25.00 PAID: YES: _____ NO: _____
ADDRESS: _____
DATE OF OCCUPANCY: _____ LENGTH OF LEASE: _____
MONTHLY RENT AMOUNT: _____ DEPOSIT AMOUNT: _____

APPLICANT:

Last Name: _____ First: _____ Middle: _____
Social Security #: _____ Drivers License # & State: _____ Birthdate: _____
Current Address: _____
City, State & Zip Code: _____
Home Phone #: _____ Email: _____

Name of current Landlord/Property Manager: _____
Phone #: _____ Monthly Rent: _____
Residency Dates / From: _____ To: _____

Previous Address: _____
City, State & Zip Code: _____
Name of previous Landlord/Property Manager: _____
Phone #: _____ Monthly Rent: _____
Residency Dates / From: _____ To: _____

CURRENT EMPLOYER:

Address: _____ Phone: _____
Supervisor Name: _____ Monthly Income: _____
Employed From: _____ To: _____

IF SELF EMPLOYED, VERIFICATION OF INCOME WILL BE REQUESTED.

CO-APPLICANT:

Last Name: _____ First: _____ Middle: _____
Social Security #: _____ Drivers License # & State: _____ Birthdate: _____
Current Address: _____
City, State & Zip Code: _____
Home Phone #: _____ Email: _____

Name of current Landlord/Property Manager: _____
Phone #: _____ Monthly Rent: _____
Residency Dates / From: _____ To: _____

Previous Address: _____
City, State & Zip Code: _____
Name of previous Landlord/Property Manager: _____
Phone #: _____ Monthly Rent: _____
Residency Dates / From: _____ To: _____

