

# RENTAL APPLICATION

*Peters Real Estate, LLC complies with all Fair Housing laws, and does not discriminate on the basis of race, color, religion, sex, handicap, familial status, or national origin.*  
**Each Co-Resident Or Co-Signer Must Submit A Separate Application**  
**Please Print Using Black or Blue Ink**

Property Applying for	Co-Applicant Name	Move In Date	Rental Amount	Deposit Amount
Applicant's Name (Last, First, Middle)		Birth Date (MM-DD-YY)	Driver's License # and State Issued	
Spouse's Name (Last, First, Middle)		Birth Date (MM-DD-YY)	Driver's License # and State Issued	
Marital Status		Applicant's Social Security #	Spouse's Social Security #	<i>Verified</i>
<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed				

## Residence History

Present Address	Apt #	City	State	Zip
Home Phone	<input type="checkbox"/> Own <input type="checkbox"/> Rent	Rent Amount	Move In Date	Move Out Date
Present Landlord 1 Mortgage Company 1 Apartment Community		Present Landlord Phone # (Include Area Code)		
Previous Address	Apt #	City	State	Zip
<input type="checkbox"/> Own <input type="checkbox"/> Rent	Rent \$	Move In Date	Move Out Date	Spouse's Address (If Different)
Previous Landlord 1 Mortgage Company 1 Apartment Community		Previous Landlord Phone # (Include Area Code)		<i>Verified</i>

## Employment History

Applicant Present Employer	Phone	Supervisor		
Address (Include City, St, Zip)	Position	Monthly Income	Hire Date	End Date
Applicant Previous Employer	Phone	Supervisor		
Address (Include City, St, Zip)	Position	Monthly Income	Hire Date	End Date
Spouse's Present Employer	Phone	Supervisor		
Address (Include City, St, Zip)	Position	Monthly Income	Hire Date	End Date
Additional Income				<i>Verified</i>
Source				
Additional income such as child support, alimony, or separate maintenance need not be disclosed <i>unless</i> such additional income is to be included for qualification hereunder. Amount of \$ _____, per _____				

## Credit and Loan References

Auto III	License #	S tate
Financed Through	Account #	Monthly Payment
Other Loans		
Financed Through	Account #	Monthly Payment
<input type="checkbox"/> American Express <input type="checkbox"/> Visa • Mastercard	Exp Date	<i>Verified</i>

<b>Bank References</b>			
Name of Bank or Savings & Loan		Address (Include City, St, Zip)	
		/Phone ( )	
Checking Account #		Savings Account #	
<b>Personal Data</b>			
In Case of Emergency Contact:		Work Phone ( )	
		/Home Phone ( )	
Above person is <input type="checkbox"/> is not <input type="checkbox"/> authorized <i>to remove and/or store contents of dwelling/mailbox in the event of serious illness or death of resident.</i>			
Personal Reference Name		Address	
		Phone # (Incl. Area Code)	
Have you or your spouse ever: <i>Been</i> Evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No		Broken a rental <i>agreement</i> ? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		Been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Been convicted of a drug related crime? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you or your spouse a Registered Sex Offender? <input type="checkbox"/> Yes <input type="checkbox"/> No	
		If yes, what state?	
Will you or the Other occupants have a pet? <input type="checkbox"/> Yes <input type="checkbox"/> No		Kind, Weight, Breed and Age	
List all other occupants who will not sign lease (minor children, etc.)			
Name		Age	Relationship
Name		Age	Relationship
List all vehicles to be parked on the premises by applicant, spouse, or children. (cars, trucks, recreational vehicles, motorcycles, boats, etc.)			
Type of Vehicle		Year	License
			State
How did you hear of this Apartment Community?		What attracted you to this Apartment Community?	
Why are you leaving your present residence?			

The Undersigned applicant(s) represent that all the above statements are true and complete and hereby authorize verification of such information. Further, false information given above shall entitle apartment community/owner to (1) Reject this application, and (2) Terminate applicant(s) Subsequent right of occupancy. Applicant(s) authorize Reliable Background Screening to obtain a credit report and criminal background check, and To verify all information listed above. Any information contained herein will be used, should an eviction or collection action become necessary.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Phone# \_\_\_\_\_

Signature of Applicant's Spouse \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_