

# APPLICATION

APPLICANT #1 Last Name	First	Middle	BIRTHDATE	DRIVER'S LICENSE # and STATE	Soc. Sec. #
APPLICANT #2 Last Name	First	Middle	BIRTHDATE	DRIVER'S LICENSE # and STATE	Soc. Sec. #
Cell phone number				email address	
Other Persons to occupy rental property	1	FULL NAME		RELATIONSHIP TO APPLICANT	DATE OF BIRTH
	2				SOCIAL SECURITY NUMBER
	3				
	4				
	5				
	6				
					Do you have a waterbed? ( ) Yes ( ) No
					Do you have waterbed insurance ? ( ) Yes ( ) No
					Do you have a pet ? ( ) Yes ( ) No
					Type/weight

### PART 1 RESIDENT HISTORY (2 YEARS)

APPLICANT #1 Present Address	City	State	Zip	How Long? from _____ to _____	( ) Own ( ) Rent	Phone	Monthly Payment
							\$
Name of Present Landlord/Mortgage Co.				City	State	Zip	Day Phone
							Night Phone
					( )		( )

### PART 2 PREVIOUS RESIDENCE HISTORY (2 YEARS)

APPLICANT #1 Previous Address	City	State	Zip	How Long? from _____ to _____	( ) Own ( ) Rent	Phone	Monthly Payment
							\$
Name of Present Landlord/Mortgage Co.				City	State	Zip	Day Phone
							Night Phone
					( )		( )
APPLICANT #2 Previous Address	City	State	Zip	How Long? from _____ to _____	( ) Own ( ) Rent	Phone	Monthly Payment
							\$
Name of Present Landlord/Mortgage Co.				City	State	Zip	Day Phone
							Night Phone
					( )		( )

### PART 3 EMPLOYMENT HISTORY (2 YEARS)

APPLICANT Employed By	Department	Supervisor's Name/Co.	How Long? from _____ to _____
Address		City	State
		Phone	Position Held/Occupation
		( )	Monthly Salary
			\$
APPLICANT Employed By	Department	Supervisor's Name/Co.	How Long? from _____ to _____
Address		City	State
		Phone	Position Held/Occupation
		( )	Monthly Salary
			\$
APPLICANT Employed By	Department	Supervisor's Name/Co.	How Long? from _____ to _____
Address		City	State
		Phone	Position Held/Occupation
		( )	Monthly Salary
			\$

ADDITIONAL INCOME: Additional income such as child support, alimony or separate maintenance need not be disclosed unless such Additional Income is to be included for qualification hereunder.

Source: Amount of \$ \_\_\_\_\_ per \_\_\_\_\_ Source \_\_\_\_\_

### PART 4 IMPORTANT INFORMATION

AUTO #1 (Year, Make, Model, Color)	License Plate	State	Payment Made to:	Monthly Payment
				\$
AUTO #2 (Year, Make, Model, Color)	License Plate	State	Payment Made to:	Monthly Payment
				\$
Name of APPLICANT'S nearest Relative	Relationship	Address	City	State
			Zip	Phone
				( )
Emergency Contact	Relationship	Address	City	State
			Zip	Phone
				( )
Personal Reference	Relationship	Address	City	State
			Zip	Phone
				( )

#### NON-REFUNDABLE APPLICATION FEE \$35.00

In compliance with the State and Federal laws, this is to inform you that an investigation involving the statements made on your rental application for residency at the above mentioned apartment community is being initiated.

**Have you or any family member or other person planning to reside in our community ever been indicted or convicted of any felony or misdemeanor offense? YES \_\_\_\_\_ NO \_\_\_\_\_**

**HAVE YOU EVER BEEN EVICTED? YES \_\_\_\_\_ NO \_\_\_\_\_**

I/We certify that to the best of my/our knowledge all statements are true and complete. I/We further authorize Todd Hollow Village to obtain credit reports, criminal background reports, character reports, verification of rental history, income history and employment history as necessary to verify all information put forth in the above referenced application for residency. Faults, fraudulent or misleading information may be grounds for denial of residency or subsequent eviction.

I/We are aware that an incomplete application causes a delay in processing and may result in denial of this application for tenancy.

In addition, applicant has paid \$\_\_\_\_\_ holding deposit to agent to hold an apartment available from date of application to date of lease initiation. In no event shall this period exceed 30 days. In the event this application is not approved by the owner or the applicant withdraws the application within 72 hours of the date of deposit, the \$\_\_\_\_\_ holding deposit shall be refunded. After that initial 72 hours period expires, it is understood that should applicant refuse to sign the lease or occupy the premises on the agreed upon date, the holding deposit is thereby forfeited. Upon occupying the premises, the \$\_\_\_\_\_ holding deposit may be applied to any amounts owing at that time, such as rent due, security deposits, etc.

Signed \_\_\_\_\_ Signed \_\_\_\_\_ Dated \_\_\_\_\_  
Applicant #1 Applicant #2

Signed \_\_\_\_\_ Title \_\_\_\_\_ Dated \_\_\_\_\_  
Agent for Owner



Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Applicant #1

Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_  
Applicant #2