

RESIDENTIAL LEASE APPLICATION

Each Occupant and co-applicant 18 years or older must submit a separate application

Property Address: _____
Anticipated: Move-In Date: _____ Monthly Rent \$ _____ Security Deposit: \$ _____

Applicant was referred to Primary Residential Management by:
 Real Estate Agent _____ (name) _____ (phone)
 Newspaper Sign Internet Other: _____

Applicant's name (first, middle, last) _____
Is there a co-applicant? yes no *If yes, co-applicant must submit a separate application*

Applicant's former last name (maiden or married) _____
E-Mail _____ Home Phone _____
Work Phone _____ Mobile/Pager _____
Soc. Sec. No. _____ Driver License No. _____ in _____ (state)
Date of Birth _____ Marital Status _____ Citizenship _____ (country)

Emergency Contact: Name: _____
Address: _____
Phone: _____ Email: _____

Name all other persons who will occupy the Property:
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____
Name: _____ Relationship: _____ Age: _____

Applicant's Current Address: _____ Apt. No. _____

(city, state, zip)
Landlord's Name: _____
Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____
Date Moved-In _____ Move-Out Date _____ Rent \$ _____
Reason for move: _____

Applicant's Previous Address: _____ Apt. No. _____
(If in current address less than 4 years) _____ (city, state, zip)
Landlord's Name: _____
Phone: Day: _____ Nt: _____ Mb: _____ Fax: _____
Date Moved-In _____ Move-Out Date _____ Rent \$ _____
Reason for move: _____

Applicant's Current Employer: _____
Address: _____ (street, city, state, zip)
Supervisor's Name: _____ Phone: _____ Fax: _____
Start Date: _____ Gross Monthly Income: \$ _____ Position: _____

Applicant's Previous Employer: _____
Address: _____ (street, city, state, zip)
Supervisor's Name: _____ Phone: _____ Fax: _____
Start Date: _____ Gross Monthly Income: \$ _____ Position: _____

Describe other income Applicant wants considered: _____

List all vehicles to be parked on the Property:

Type	Year	Make	Model	License/State	Mo.Pymt.

List all pets to be kept on the Property (dogs, cats, and other household pets):

Type & Breed	Name	Color	Weight	Age	Gender	Neutered?	Declawed?	Rabies Shots Current?
						<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no
						<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no

References:

Name: _____	Address: _____	Relation: _____	Phone: _____
Name: _____	Address: _____	Relation: _____	Phone: _____
Name: _____	Address: _____	Relation: _____	Phone: _____
Name: _____	Address: _____	Relation: _____	Phone: _____

	Yes	No	Explanation
Will any waterbeds or water-filled furniture be on the Property?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Does anyone who will occupy the Property smoke?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Will Applicant maintain renter's insurance?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is Applicant or Applicant's spouse, even if separated, in military?	<input type="checkbox"/>	<input type="checkbox"/>	_____
If yes, is the military person serving under orders limiting the military person's stay to one year or less?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Has the Applicant ever:			
been evicted?	<input type="checkbox"/>	<input type="checkbox"/>	_____
been asked to move out by a landlord?	<input type="checkbox"/>	<input type="checkbox"/>	_____
breached a lease or rental agreement?	<input type="checkbox"/>	<input type="checkbox"/>	_____
filed for bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>	_____
lost property in a foreclosure?	<input type="checkbox"/>	<input type="checkbox"/>	_____
had any credit problems?	<input type="checkbox"/>	<input type="checkbox"/>	_____
been convicted of a crime?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is any occupant a registered sex offender?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are there any criminal matters pending against any occupant?	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is there additional information Applicant wants considered?	<input type="checkbox"/>	<input type="checkbox"/>	_____

Authorization & Representation: Applicant authorizes Primary Residential Management (PRM), at any time before, during, or after any tenancy, to: (1) obtain a copy of the Applicant's credit report; (2) obtain a criminal background check related to Applicant and any occupant; and (3) verify any rental or employment history or verify any other information related to this application with persons knowledgeable of such information. Applicant represents that the statements in this application are true and complete. Applicant understands that providing false or inaccurate information is grounds for rejection and a breach of any lease.

Notice: Unless agreed otherwise in writing, the Property remains on the market until a lease is signed and Primary Residential Management may continue to show the Property to other prospective tenants and accept another offer. Primary Residential Management maintains a privacy policy that is available upon request.

Fees: Applicant submits a non-refundable fee of **\$25.00 per applicant** for processing and reviewing this application. To hold the property you are applying for, a hold deposit of \$ _____ must be submitted. This holding deposit will be applied to your total move-in costs when approved. If your application is accepted, you will be required to sign your lease within five (5) days of acceptance. All necessary paperwork must be turned in to us at the time you sign your lease. All move-in funds must be received prior to receiving your keys. All move-in funds must be in the form of a cashier's check or money order. **NO PERSONAL CHECKS OR CASH WILL BE ACCEPTED.** If for any reason you choose not to move into the property you have applied for after acceptance of your application, you forfeit your deposits on hold. **NO EXCEPTIONS.**

Applicant's Signature _____

Date _____