



# RENTAL APPLICATION

Management & Marketing Concepts, Inc.

All fields are required. If a question does not apply to you, please enter N/A (or 0 if the field is numeric). Incomplete applications will not be processed.

APPLICATION DATE: \_\_\_\_\_

DESIRED DATE OF OCCUPANCY: \_\_\_\_\_

PROPERTY NAME: \_\_\_\_\_

APT UNIT# OR HOUSE ADDRESS: \_\_\_\_\_

APT TYPE: \_\_\_\_\_

APPLICANT'S NAME		BIRTH DATE	
FIRST ..... MIDDLE ..... LAST ..... MAIDEN NAME		MO .. DAY .. YEAR	
SOCIAL SECURITY NO (APPLICANT) _____ - _____ - _____		MARRIED <input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED <input type="checkbox"/> SEPARATED <input type="checkbox"/>	
PHONE NO (APPLICANT) (____) _____ - _____		HOME <input type="checkbox"/> MOBILE <input type="checkbox"/> WORK <input type="checkbox"/> E-MAIL _____	
SPOUSE'S NAME		BIRTH DATE	
FIRST ..... MIDDLE ..... LAST ..... MAIDEN NAME		MO .... DAY .... YEAR	
SOCIAL SECURITY NO (SPOUSE) _____ - _____ - _____			
PHONE NO (SPOUSE) (____) _____ - _____		HOME <input type="checkbox"/> MOBILE <input type="checkbox"/> WORK <input type="checkbox"/> E-MAIL _____	
NAMES AND AGES OF ANYONE ELSE WHO WILL OCCUPY THE APARTMENT/HOME AND RELATIONSHIP:			
1. _____	2. _____	3. _____	
4. _____	5. _____		
PRESENT ADDRESS _____		ZIP CODE _____	HOW LONG _____ YRS _____ MOS
MONTHLY RENT/MORTGAGE \$ _____		LANDLORD/MTG. CO _____	PHONE NO (____) _____ - _____
REASON FOR MOVING _____			
PREVIOUS ADDRESS _____		ZIP CODE _____	HOW LONG _____ YRS _____ MOS
MONTHLY RENT/MORTGAGE \$ _____		LANDLORD/MTG. CO _____	PHONE NO (____) _____ - _____
HAS APPLICANT, SPOUSE, OR ANY OTHER PROPOSED RESIDENT EVER:			
BEEN EVICTED FROM TENANCY?		NO <input type="checkbox"/> YES <input type="checkbox"/>	IF YES, EXPLAIN: _____
REFUSED TO PAY RENT WHEN DUE?		NO <input type="checkbox"/> YES <input type="checkbox"/>	IF YES, EXPLAIN: _____
FILED FOR BANKRUPTCY?		NO <input type="checkbox"/> YES <input type="checkbox"/>	IF YES, EXPLAIN: _____
BEEN CONVICTED OF A CRIME?		NO <input type="checkbox"/> YES <input type="checkbox"/>	IF YES, EXPLAIN: _____
VEHICLES-NOT ALLOWED WITHOUT WRITTEN PERMISSION. VEHICLES NOT APPROVED MAY BE TOWED AT OWNER'S EXPENSE.			
1. MAKE _____	MODEL _____	YEAR _____	COLOR _____ LICENSE PLATE NO _____ STATE _____
2. MAKE _____	MODEL _____	YEAR _____	COLOR _____ LICENSE PLATE NO _____ STATE _____
DRIVER'S LICENSE NO (APPLICANT) _____		STATE _____	DRIVER'S LICENSE NO (SPOUSE) _____
STATE _____			
PET TYPE _____	BREED _____	WEIGHT _____	AGE _____ HOUSEBROKEN? YES <input type="checkbox"/> NO <input type="checkbox"/>
PET TYPE _____	BREED _____	WEIGHT _____	AGE _____ HOUSEBROKEN? YES <input type="checkbox"/> NO <input type="checkbox"/>
EMPLOYER (APPLICANT) _____		SUPERVISOR _____	
EMPLOYER'S ADDRESS _____		PHONE NO (____) _____ - _____	
POSITION HELD _____	HOW LONG _____ YRS _____ MOS	GROSS SALARY \$ _____	PER: WK <input type="checkbox"/> MO <input type="checkbox"/> YR <input type="checkbox"/>
PREVIOUS EMPLOYER: _____		POSITION HELD _____	
EMPLOYER (SPOUSE) _____		SUPERVISOR _____	
EMPLOYER'S ADDRESS: _____		PHONE NO (____) _____ - _____	
POSITION HELD _____	HOW LONG _____ YRS _____ MOS	GROSS SALARY \$ _____	PER: WK <input type="checkbox"/> MO <input type="checkbox"/> YR <input type="checkbox"/>
PREVIOUS EMPLOYER: _____		POSITION HELD _____	
IN CASE OF ILLNESS, ACCIDENT, EMERGENCY, ETC., PLEASE NOTIFY (MUST BE SOMEONE NOT LIVING IN HOUSEHOLD):			
NAME _____		RELATIONSHIP _____	
ADDRESS _____		PHONE NO (____) _____ - _____ HOME <input type="checkbox"/> MOBILE <input type="checkbox"/> WORK <input type="checkbox"/>	

I hereby make application for a home/apartment and certify that this information is correct and I have read and understand the Resident Selection Criteria. I authorize landlord/agent to contact any references that I have listed and to obtain my consumer credit report from a credit reporting agency, which will appear as an inquiry on my file. I also understand that in the event I choose to pay a security deposit and admin fee to hold the property for a given time before occupancy and I later determine I do not wish to occupy the property, my deposit and admin fee will be forfeited. I further understand that the application fee is not refundable even if this application is declined. I understand that any move-in special I am eligible to receive is contingent upon fulfillment of the lease term in full. If for any reason the lease is terminated or I choose to vacate the premises before completion lease term, I agree to repay any rent concessions I have received.

By entering your name(s) in the signature field(s), you acknowledge that you have read and agree with the above.

\_\_\_\_\_  
Tenant Applicant Signature

\_\_\_\_\_  
Tenant Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

When all entries are correct and complete, click on the submit button at the bottom right of this screen.