



Rental Application

Property _____ (479) 521-9177 Office
 Unit # _____ (479) 521-6199 Fax

 Applicant Name: Last First MI Birth date

 Driver's Lic & State Soc. Sec. #

Spouse's Name: First MI Maiden Birth date

 Driver's Lic & State Soc. Sec. #

Expected Move in Date: _____ The number of people (include children) to live in unit: _____
 Reason for Moving: _____ Do you have any Pets: _____ How many: _____

Present Address City/State Zip How long Phone #

 Name & Address of Landlord / Mortgage Co Telephone Monthly Payment

Applicant Employed By Supervisor's Name How Long Salary

Spouse Employed By Supervisor's Name How Long Salary

Additional income (parents, alimony, separate maintenance, child support, or other) if used for payment. Alimony, separate maintenance, spousal support and child support are not requested, but may be disclosed by the application if the applicant desires for Houses, Inc. to consider these sources of income when approving or denying any application. Source _____ Amount \$ _____ per _____

Credit Reference Account Number Address

 Personal Reference Address City/State Zip Phone #

In Case of an Emergency and we can not reach you, we should call the following person:
 Name Address City/State Zip Phone #

 Automobile _____ Yr _____ Lic # _____ Automobile _____ Yr _____ Lic # _____

Have you ever been evicted from any apartment Community? _____ Have you ever filed bankruptcy? _____ Do you have renters insurance _____ Do you have a water bed? _____ Have you ever been arrested and/or convicted of a Class A or B misdemeanor or a felony? _____ If yes, explain _____ State _____ Are you required or have you ever been required to register your address under any Megan's law or sexual offender law? _____ If yes, explain _____

****PLEASE READ AND SIGN THE REVERSE SIDE OF THIS APPLICATION**.**



Received from applicant \$ _____ .00, non-refundable fee to hold apartment for a maximum of 30 days. Upon credit approval and execution of a lease, fee will be applied to Security Deposit. In case of credit denial, deposit will be refunded less cost occurred obtaining credit information. Received from applicant a non-refundable application fee of \$ _____ .00.

Agency representation. Resident/Tenant understands that leasing agent firm is in the business of representing the owners for the rental of real property and is paid a fee for such service. If the resident/tenant decides to view or lease property from the owner represented by the leasing agent firm, tenant hereby acknowledges that he/she has the right to obtain his/her representation. Houses, Inc. its owners, employees, and agents, and the owners of each property managed by Houses, Inc., provide equal opportunity housing and will not discriminate against any person or impose different terms and conditions on any person based on a person's race, color, familial status, religion, sex, age, physical or mental disability, or national origin.

We/I declare that all information is true and correct. We/I authorize Houses, Inc. to verify and obtain a complete consumer history report, including but not limited to credit report, landlord verification, employment verification, reference verifications, criminal background check, banks, or finance companies. This information is not privileged and may be used for future reference.

Application Signature/Date

Spouse Signature/Date

Received by/Date

If paying by credit card:

____ Visa ____ Master Card ____ Discover ____ American Express

Credit Card # _____

Name on Card _____

Billing Address _____

CVC _____

Expiration Date _____

Amount to Charge \$ _____

Signature _____