

# Application Form

Security Deposit: \$ 200.00  
Application Fee: \$ 50.00 (per applicant)

Date: \_\_\_\_\_  
Size Apt: \_\_\_\_\_  
Rent: \$ \_\_\_\_\_  
Lease Term: 6mo or 12mo  
(circle one choice)  
Date of Occupancy:  / /

## POSITIVE IDENTIFICATION IS REQUIRED

Full Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Date of Birth:  / / Driver License #: \_\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_  
Marital Status (circle one choice): Single Engaged Married Separated Divorced

## PRESENT ADDRESS:

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Dates of Occupancy: \_\_\_\_\_ Own \_\_\_\_ or Rent \_\_\_\_  
(from) (to)  
Home Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_  
Name of Landlord (if renting): \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
-OR-  
Name of Mortgage Holder: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Account #: \_\_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_

## PREVIOUS ADDRESS:

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Dates of Occupancy: \_\_\_\_\_ Own \_\_\_\_ or Rent \_\_\_\_  
(from) (to)  
Home Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_  
Name of Landlord (if renting): \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
-OR-  
Name of Mortgage Holder: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
Account #: \_\_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_

## NEAREST RELATIVE NOT LIVING WITH YOU:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

## IN CASE OF EMERGENCY:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_  
\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

**EMPLOYMENT:**

Name of Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Position: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Subject to Transfer?: \_\_\_\_\_ Annual Salary: \$ \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**SPOUSE / ROOMMATE INFORMATION:**

Full Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Driver License #: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Marital Status (circle one choice): Single Engaged Married Separated Divorced

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Dates of Occupancy: \_\_\_\_\_ Own \_\_\_\_\_ or Rent \_\_\_\_\_  
(from) (to)

Home Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_

Name of Landlord (if renting): \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

-OR-

Name of Mortgage Holder: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Account #: \_\_\_\_\_ Amount of Monthly Payment: \$ \_\_\_\_\_

Name of Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

Position: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_

Subject to Transfer?: \_\_\_\_\_ Annual Salary: \$ \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Length of Employment: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

**IN CASE OF EMERGENCY:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

**ADDITIONAL OCCUPANTS:**

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**MOTOR VEHICLES:**

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag#: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Tag#: \_\_\_\_\_

**PET INFORMATION:**

Type: \_\_\_\_\_ Breed: \_\_\_\_\_ Weight: \_\_\_\_\_ lbs Age: \_\_\_\_\_ Color: \_\_\_\_\_

**REFERENCES:**

**BANK – Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

**PERSONAL – Name:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
(Street Address) (City) (State) (Zip)

**PLEASE READ THE FOLLOWING CAREFULLY:**

I (we) certify that the above information is true and correct, to the best of my (our) knowledge. I (we) understand that you will retain this application whether or not it is approved. You are authorized to check my credit, employment, character, general reputation, personal references and if deemed necessary, a criminal investigation. I (we) further certify that I (we) am (are) adults (over the age of 18) and I (we) understand the importance of accurate information. I (we) further understand that approval of this application is based all in part on the information contained herein. Should this application be approved and a lease contract be executed, I (we) further understand that this application is made part of the lease and if later, it is determined that the information provided herein was incorrect, said incorrect information shall be grounds for termination of the remainder the lease contract.

I (WE) AGREE TO ALLOW LESSOR TO VERIFY THE ABOVE INFORMATION AND TO CHECK SOURCE DEEMED PERTINENT IN REGARD TO ACCEPTING THE APPLICATION. IN THE EVENT APPLICANT DOES NOT ACCEPT APARTMENT AFTER BEING APPROVED BY LESSOR, THIS DEPOSIT SHALL BE FORFEITED AS LIQUIDATED DAMAGES. THIS DEPOSIT WILL BE REFUNDED IN FULL IF APPLICATION IS NOT ACCEPTED. THE INFORMATION GIVEN ABOVE HAS NOT BEEN FALSIFIED.

I (we) agree to pay \$ \_\_\_\_\_ as a non-refundable application fee for processing the application forms and for the credit and criminal background reports.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse / Roommate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Management Representative

\_\_\_\_\_  
Date

We are pledged to letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the Nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color religion, sex, handicap, familial status, or national origin.



**DO NOT WRITE BELOW THIS LINE**

**Applicant:**

**Approved:** \_\_\_\_\_ **Decision Made By:** \_\_\_\_\_

**Unapproved:** \_\_\_\_\_ **Date Decision Made:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

**AUTHORIZATION FOR RELEASE OF INFORMATION**

**I hereby authorize The Bryan Company and their agents to receive any credits and / or criminal history record information pertaining to me which may be in the files of any credit reporting agency or state or local criminal justice agency and I release all parties from liability for issuing such information.**

**Full Name:** \_\_\_\_\_

**Social Security #:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_ **Driver License #:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_