

**APPLICATION FOR LEASE**

**Policy: Applicant must be 21 years of age and be employed full time or have a parent or guardian co-sign the Application for Lease Agreement.**

APARTMENT # \_\_\_\_\_ DATE: \_\_\_\_\_ AGENT: \_\_\_\_\_ APPLICATION Fee \$25.00

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

SSN: \_\_\_\_\_ Birthday: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Names of all persons occupying the residence ( Use the back side of this Page for additional occupants)**

Full Name	Age	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Residential History**

Current Physical Address (No PO Boxes): Street: \_\_\_\_\_

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

Amount of time at this address \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

Landlords Name \_\_\_\_\_ Amount of time at this address: \_\_\_\_\_

Previous address (No PO Boxes): Street \_\_\_\_\_

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

Amount of time at this address \_\_\_\_\_ Reason for Leaving \_\_\_\_\_  
\_\_\_\_\_

Landlords Name \_\_\_\_\_ Phone # \_\_\_\_\_

## Employment Information

Employer \_\_\_\_\_ Length of employment \_\_\_\_\_  
Full time \_\_\_\_\_ Part time \_\_\_\_\_ Student \_\_\_\_\_ Rent assistance \_\_\_\_\_  
Unemployed \_\_\_\_\_ Supervisor Name \_\_\_\_\_ Work Phone# \_\_\_\_\_

Salary \$ \_\_\_\_\_ Week \_\_\_\_\_ Monthly \_\_\_\_\_ Annually \_\_\_\_\_  
Rental Assistance Provider \_\_\_\_\_ Amount: \_\_\_\_\_

Co-Applicant Employer \_\_\_\_\_ Length of employment \_\_\_\_\_  
Full time \_\_\_\_\_ Part time \_\_\_\_\_ Student \_\_\_\_\_ Rent assistance \_\_\_\_\_  
Unemployed \_\_\_\_\_ Supervisor Name \_\_\_\_\_ Work Phone# \_\_\_\_\_

Salary \$ \_\_\_\_\_ Week \_\_\_\_\_ Monthly \_\_\_\_\_ Annually \_\_\_\_\_  
Rental Assistance Provider \_\_\_\_\_ Amount: \_\_\_\_\_

## Other Sources of Income & Amount (Please Describe):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone# \_\_\_\_\_  
Relationship \_\_\_\_\_

Where may we reach you to discuss this Application? \_\_ Day \_\_\_\_\_ Night \_\_\_\_\_

YES/ NO Have you or your spouse or co-lessee ever been sued for non-payment of debt or filed bankruptcy? If you circled YES, explain on the back of this application.

YES/ NO Have you or any one that will be occupying the leased premises been convicted of a misdemeanor or felony or any violent crime or sex related crime? If you circled YES, explain on the back of this application.

YES/ NO Have you or any one that will be occupying the premises been institutionalized for any mental disorder?

I UNDERSTAND THAT NO PETS ARE ALLOWED AND THAT ANY PETS ON THE PREMISES AT ANY TIME, BY ANYONE, FOR ANY REASON, IS CAUSE FOR IMMEDIATE EVICTION.

Lessee Initials \_\_\_\_\_ Co-lessee Initials \_\_\_\_\_

I HEREBY AFFIRM THAT THE INFORMATION LISTED IS TRUE AND CORRECT AND IS GIVEN TO CREASY PROPERTIES, LLC. TO LEASE PROPERTY TO ME. I FURTHER AUTHORIZE CREASY PROPERTIES, LLC. TO OBTAIN A CREDIT REPORT ON MY CREDIT HISTORY AND TO VERIFY EMPLOYMENT, SALARY INFORMATION, FORMER ADDRESS AND LEASE INFORMATION AND OBTAIN CRIMINAL, CIVIL AND ANY OTHER BACKGROUND HISTORY.

Lessee Signature \_\_\_\_\_ Date \_\_\_\_\_  
Co-Lessee signature \_\_\_\_\_ Date \_\_\_\_\_

**QUESTIONS TO ASK FORMER LANDLORD**

NAME \_\_\_\_\_

1. DID THIS FORMER TENANT LEAVE OWING MONEY FOR RENT OR UTILITIES? YES \_\_\_\_\_ NO \_\_\_\_\_

2. WOULD YOU RENT TO THIS PERSON AGAIN? YES \_\_\_\_\_ NO \_\_\_\_\_

3. WOULD YOU DESCRIBE THIS PERSON'S HOUSE KEEPING HABITS AS

GOOD \_\_\_\_\_ FAIR \_\_\_\_\_ POOR \_\_\_\_\_

4. DID THEY PAY THEIR RENT ON TIME? YES \_\_\_\_\_ NO \_\_\_\_\_

5. DID THEY GET ALONG WITH THEIR NEIGHBORS? YES \_\_\_\_\_ NO \_\_\_\_\_

6. DID THE FORMER TENANT HAVE ANY PETS? YES \_\_\_\_\_ NO \_\_\_\_\_

7. DID THIS TENANT DESTROY ANY PROPERTY? YES \_\_\_\_\_ NO \_\_\_\_\_

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APPROVED / DISAPPROVED.