

# Rental Application



## PERSONAL INFORMATION

(Answer all questions completely)

First Name		Middle Name		Last Name		Maiden Name (if applicable)			
Marital Status (check one)    Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/>						How did you hear about us?			
Office Phone		Work Phone		Cell Phone		Fax		Email Address	
Date Of Birth			Drivers License # / State			Social Security Number			

## ADDRESS INFORMATION

Current Address				City / State / Zip		Country		
Months at this Address		Start Date		Monthly Rent / Mortgage Payment		Reason for Moving		
Name of Landlord / Apartment Community / Management Company						Landlord Phone Number		Was 30 day notice given?
Previous Address (if at current address less than 2 years)				City / State / Zip		Country		
Months at this Address		Start Date		Monthly Rent / Mortgage Payment		Reason for Moving		
Name of Landlord / Apartment Community / Management Company						Landlord Phone Number		Was 30 day notice given?

## EMPLOYMENT INFORMATION

Employment Status (check one)    Employed <input type="checkbox"/> Student <input type="checkbox"/> Retired <input type="checkbox"/> Never Employed <input type="checkbox"/> Other <input type="checkbox"/>						Country	
Company				Position		Start Date	
Address				City / State / Zip		Gross Monthly Income	
Employer Phone		Supervisors Name		Additional Income		Additional Income Source	

## PREVIOUS EMPLOYMENT INFORMATION

(if current employment less than 1 year)

Company				Position		Start Date		End Date	
Address				City / State / Zip		Gross Monthly Income			
Employer Phone		Supervisors Name		Additional Income		Additional Income Source			



## EMERGENCY CONTACT

Name	Relationship	Address	City / State / Zip	Contact Phone
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## VEHICLES

Vehicle Make	Vehicle Model	Vehicle Color	Vehicle Year	Vehicle License Plate #	Vehicle License State

## PET INFORMATION

Type	Weight	Age	Color	Name	Breed	Gender	Spayed/Neutered? Yes <input type="checkbox"/> No <input type="checkbox"/>

## SCREENING INFORMATION

Check one: You are a U. S. Citizen <input type="checkbox"/> or You have a legal right to be in the U.S. <input type="checkbox"/>	Have you ever been evicted? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain:
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Have you ever been convicted of a felony or misdemeanor? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, please explain:
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## ADDITIONAL OCCUPANTS (If Applicable)

(all persons who will occupy the unit without signing a lease.)

Name	Social Security Number	Driver's license or Government ID Card Number & State

The apartment may be occupied by up to three (3) persons per one bedroom apartment, five (5) persons per two bedroom apartment, seven (7) persons per three bedroom apartment or nine (9) persons per four bedroom apartment. Rooms such as dens, studies, or "bonus" rooms should be counted as "bedrooms" for purposes of this occupancy guideline. The entirety of the Buckingham Occupancy Guideline can be accessed by contacting the community Leasing Office.

## ACKNOWLEDGMENT & AUTHORIZATION

You declare that all of your statements in this Application are true and complete. You authorize us to verify same through any means. If you fail to answer any question or give false information, we may reject the application, retain all application fees and deposits as liquidated damages for our time and expense, and terminate your right of occupancy. Giving false information is a serious criminal offense. In lawsuits relating to the application or Lease contract, the prevailing party may recover all attorney's fees and litigation costs from the losing party. We may at any time furnish information to consumer reporting agencies and other rental housing owners regarding your performance of your legal obligations, including favorable and unfavorable information about your compliance with the Lease contract, the rules, and financial obligations.

I hereby authorize \_\_\_\_\_ to obtain consumer reports, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information. I understand that subsequent consumer reports may be obtained and utilized under this authorization in connection with an update, renewal, extension or collection with respect or in connection with the rental or lease of a residency for which this application was made.

Applicant's Signature	Date
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## For Office Use Only

Application Fee Paid (non-refundable)	Administration Fee Paid (may or may not be refundable)	Other Fees Paid
Apt. Name or Dwelling Address (street, city)	Person Accepting Application	Phone
Unit Number or Type	Person Processing Application	Phone
Date That Applicant or Co-Applicant Was Notified by: <input type="checkbox"/> Telephone <input type="checkbox"/> Letter <input type="checkbox"/> In Person of <input type="checkbox"/> Acceptance or <input type="checkbox"/> Nonacceptance	Name of Person(s) Notified (at least one applicant must be notified if multiple)	Name of Owner's Representative Who Notified Previous Person

# APPLICANT INCOME QUESTIONNAIRE



Name \_\_\_\_\_

Household Size \_\_\_\_\_

Note: It is required that one (1) Applicant Income Questionnaire be completed per household member age 18 and older or if married, one (1) Applicant Income Questionnaire is required per married couple.

## Annual Income

Examples of Anticipated Annual Income Include: Wages, Benefits, Child Support, Pensions, and Social Security, etc.

Household Member	Description of Income	Gross Monthly Payment	Annual Amount

## Asset Income

Examples of Assets Include: Checking, Savings, Real Estate, Certificate of Deposit's, Debit Card, etc.

HOUSEHOLD MEMBER	TYPE OF ACCOUNT <i>(ie. Checking, Savings, Debit, etc.)</i>	CASH VALUE OF ACCOUNT	INTEREST RATE	TOTAL INCOME FROM ASSET <i>(Cash Value X Interest Rate = Income from Asset)</i>
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$
		\$		\$

By signing below, I certify that I have listed all income from the household and that this is true to the best of my knowledge and belief. I understand that false statements or information are punished under federal law.

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

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Spouse

\_\_\_\_\_  
Printed Name of Spouse

\_\_\_\_\_  
Date

We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap or familial status.

