

**TRIANON LOFTS AT WOODLAWN PARK**

**\$20 Non-refundable Application Fee Required for each Applicant**

803 East 61st Street | Chicago, IL 60637  
773-955-8668 | www.TrianonLofts.com



A SMOKE-FREE COMMUNITY

**APPLICANT INFORMATION** *Each occupant age 18 or older must fill out a separate application.*

Applicant Name:			SSN:		
Current Address:			<input type="checkbox"/> Own <input type="checkbox"/> Rent		
City:		State:	Zip:	Birth Date:	
Home #:		Cell #:		Work #:	
Any other names you've used in the past:			Driver's License or Government Issued ID #:		
Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No			<b>APARTMENT REQUESTED</b> # Bedrooms   # Bathrooms   Desired Move-In Date		
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes, please explain			Other Requests/Comments		
Names of all other proposed occupants:		Date of Birth:		Relationship to Applicant:	

**RENTAL HISTORY**

Current or Most Recent Address			Monthly Rent / Payment	Dates of Residency
Landlord Name & Number			Reason for Leaving	
Is/Was Rent Paid in Full?	Did you give notice?	Were you asked to move?	Name(s) in which utilities now billed?	
Previous Address			Monthly Rent / Payment	Dates of Residency
Landlord Name & Number			Reason for Leaving	
Is/Was Rent Paid in Full?	Did you give notice?	Were you asked to move?	Name(s) in which utilities now billed?	

**EMPLOYMENT INFORMATION**

Current Employer		Dates of Employment	
Address		Position/Title	
Phone	Email	Rate per Hour	Annual Income

**CREDIT REFERENCES**

Bank or Financial Institution Name	Address	Phone

**List any verifiable sources and amounts of income you wish to have considered (optional).**

Source	Phone	Amount per month



## REFERENCES / EMERGENCY CONTACTS

Name of a person not residing with you:	Relationship:
Address	Phone:
Name of a person not residing with you:	Relationship:
Address	Phone:

## VEHICLES (Include vehicles belonging to all proposed occupants)

Make	Model	Color	Year	License Plate

## PET INFORMATION

Type of pet	Breed	Name	Color	Weight	Age

## GENERAL INFORMATION

Do any of the people who will be living in the apartment smoke?

Have you ever been served a late rent notice?	Have you ever been served an eviction notice? If so, when?
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Why are you moving from your current address?

Have you had any recurring problems with your current apartment or landlord? If yes, please explain.

Have you ever filed for bankruptcy? If so, when?

We may run a credit check and a criminal background check. Is there anything negative we will find you wish to explain?

How did you hear about this apartment?

Do you know of anyone else looking for an apartment? Please provide their name and number. If you refer a friend and you each rent separate apartments from us, we will pay you a referral reward.

## AGREEMENT & AUTHORIZATION SIGNATURE

*I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I have provided and communication with any and all names listed on this application. I understand any discrepancy or lack of information may result in the rejection of this application. I understand this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. I further understand there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund if I do not get the apartment. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed, stamped envelope to the address on this application.*

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

