



Resident Rental Application

(Each prospective resident must fill out a separate application)

Property Address _____ Today's Date: _____

Note: This application is subject to the approval by the owner and/or the owner's agent who reserves the right to decline to rent to the applicant or to refuse possession of the premises until a formal rental agreement has been executed between the lessor and lessee, the security deposit received, and all co-signers provided.

PERSONAL INFORMATION:

Name: _____

Birthdate: _____ Social Security No: _____

Current Address: _____
(Street) (City) (State) (Zip)

Current Phone: (Home) (_____) (Cell Phone) (_____) _____

Email Address: _____

Current Landlord: _____
(Name of Apt or Dorm) (Address) (Phone)

EMPLOYER INFORMATION:

Are you Employed Full Time? ☐ Yes ☐ No (if no, you must provide co-signer information below)

Employer Name: _____
(Street) (City) (State) (Zip)

Name of Immediate Supervisor: _____ Phone: _____

Net Monthly Income: _____ How long have you been at current employer? _____

CO-SIGNER INFORMATION: (for applicants who are NOT employed Full-Time)

Name: _____

Address: _____ Phone: _____

EMERGENCY CONTACT:

Name: _____ Relation To: _____

Address: _____ Phone: _____



PROOF OF IDENTIFICATION: (please provide 2 pieces of ID, ie Drivers License, Student ID, SS card, Birth certificate)

Drivers License: _____
(Number) (State) (Expiration Date)

Other ID: : _____
(Type) (Number) (State) (Expiration Date)

PERSONAL REFERENCES: (at least 2 please)

Name: _____ Relation: _____ Phone: (____) _____

Name: _____ Relation: _____ Phone: (____) _____

Name: _____ Relation: _____ Phone: (____) _____

HOW DID YOU HEAR ABOUT THIS PROPERTY?

☐ Facebook ☐ Newspaper ☐ Friends ☐ Other (please specify) _____

OTHER:

How many people will be living in the home? # of Adults _____ # of Children _____

Do you have pets? ☐ Yes ☐ No, if yes how many ____ Type/Breed _____

If your Application is approved, what is your anticipated Move-In Date? _____

Can you be flexible regarding your Move-In Date? ☐ Yes ☐ No

If Yes, specify range of possible Move-In Dates: _____

FORWARDING INFORMATION:

Permanent Address: _____
(Street) (City) (State) (Zip)

Permanent Phone: (____) _____

I certify that all the information provided on this application is honest and accurate to the best of my knowledge. In addition, I give permission to HOME TEAM Properties, LLC, to perform the necessary reference checks on my employer, current and past residences, etc.

Signature