RENTAL APPLICATION

Each adult (18 or older) must fill out a separate application

First Midd	e	Last	Birth I	ate	Social Security	#	Driver's License #	
Any Other Names You've Used In The Past				Home Phone		C	Cell Phone	
					Birth Date	Daletionship	To Applicant	
All Other Proposed Occupants					Birth Date	Relationship	э 10 Аррисан	
LENTAL/RESIDENCE	HISTOR	ΧY						
		Current Residence		Pre	vious Residence		Prior Residence	
Street Address								
City								
State & Zip								
Last Rent Amount Paid								
Owner/Manager				*********				
and Phone Number								
Reason for leaving								
ls/Was rent paid in full?								
Did you give notice?							~	
Were you asked to move?								
Name(s) in which your								
utilities are now billed:		From/To			From/To	· · · · · · · · · · · · · · · · · · ·	From/To	
Dates of Residency		110101						
EMPLOYMENT HISTO								
		Current Employment	:	Previ	ous Employment		Prior Employment	
		Current Employment						
		Current Employmen						
Address		Current Employmen						
Address Employer's Phone		Cur Employmen						
Address Employer's Phone Occupation		Cur Employmen						
Address Employer's Phone Occupation Name of Supervisor		Cur Employmen						
Employed By Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay								
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay		From/To			From/To		From/To	
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay					From/To		From/To	
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment	-	From/To		iame	From/To	Ralance		
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY		From/To	nk/Institution N	Vame	From/To	Balance O	From/To Tom/To Deposit or Balance Owed	
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY Savings Account		From/To		šame	From/To	Balance O		
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY Savings Account Checking Account		From/To		ame	From/To	Balance O		
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY Savings Account Checking Account		From/To		ame	From/To	Balance O		
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY Savings Account Checking Account Credit Card Auto Loan		From/To	nk/Institution N		From/To	Balance O		
Address Employer's Phone Occupation Name of Supervisor Monthly Gross Pay Dates of Employment CREDIT HISTORY Savings Account Checking Account		From/To Ba Ba longing to other pro	nk/Institution N		From/To	Balance O		

Name					
Street Address					
City					
State & Zip					
Phone Number				d and the sets you Eurthermore if you	
By signing the application abandon the apartment	on you grant us permission to nt for any reason then you gra	communicate wi nt us permission	th all the contacts listed in this section is to allow your relative listed above to re	n the event we can't locate you. Furthermore, if you move all contents of the dwelling on your behalf.	
GENERAL INFORM	ATION				
Have you ever been served a late rent notice?		Do any of the		How long do you think you would be renting from us?	
		who would be living in the apartment smoke?		do you think you would be reading from as-	
	1 1 9 If as when	2 When u	ould you be able to move in?	Have you ever been convicted of a felony?	
Have you ever filed to	r bankruptcy? If so, when	. When w	oute you be able to move in		
Have you ever been se	rved an eviction notice? If	so, when? H	low many pets do you have (list Ty	pe, Breed, approx Weight & Age)?	
		İ			
Have you had any reo	ccurring problems with ye	our current apa	rtment or landlord? If yes, please of	explain:	
Why are you moving	from your current address	<u>)?</u>			
L'	wass and amounts of incor	ne von wish to	have considered (optional):		
List any vermanie soi	irces and amounts of meon	ne you wan to			
If you were to run int	o financial difficulty in the	future and cou	ildn't come up with the money to p	ay the rent, do you know someone that would	
loan you the money?	If so, provide the person's	name, address,	& phone # so that we can use then	as a reference for you.	
		If places as	mlain why:		
Have you been a part	y to a lawsuit in the past?	it yes, piease ex	cpiani wuy.		
We may run a credit	check and a criminal back	ground check.	Is there anything negative we will	find that you want to comment on?	
We may run a creat	Little and a comment	<u> </u>			
How did you hear ab	out this apartment?		Do you have an e-mail address we c	an reach you at?	
				o o: 1 1 - 1 - 1 - 1 - 1 - 1	
Do you know of anyb	ody else looking for an ap	artment? Pleas	e provide their name and number.	If you refer a friend and you each end up renting	
separate apartments	from us then we will pay y	ou a reierrai re	.waiu.		
		Agreement	& Authorization Signature	ti i lababa ka mada yanifiaatian	
I believe that the sta-	tements I have made are	true and corr	ect. I hereby authorize a credit a	and/or criminal check to be made, verification	
of information I pro	vided and communication	on with any a	ication. Lunderstand that this is	ication. I understand that any discrepancy or an application for an apartment and does not	
associatives a contal o	r lasce agreement in W	hole or nart l	further understand that there i	s a non-relundable lee to cover the cost of	
processing my appl	ication and I am not e	ntitled to a re	efund even if I don't get the a	ipartment. Any questions regarding rejected	
applications must be	submitted in writing an	d accompanie	ed by a self-addressed stamped e	envelope.	
			5.		
Signature:			Date	e:	

Lawyer

Nearest Relative Living Elsewhere

Great Places, Inc. P.O. Box 5535 Missoula, MT 59806

REFERENCES & EMERGENCY CONTACTS

Doctor