

RENTAL APPLICATION & AUTHORIZATION

NAME: _____ CO-APPLICANT: _____
ADDRESS: _____ ADDRESS: _____
CITY: _____ STATE: _____ ZIP _____ CITY: _____ STATE: _____ ZIP _____
PHONE: _____ SSN: _____ PHONE: _____ SSN: _____
DOB: _____ DOB: _____
DRIVERS LICENSE NO. _____ DRIVERS LICENSE NO. _____
MINOR RESIDENTS: _____ SSN: _____ DOB: _____
_____ SSN: _____ DOB: _____

PREVIOUS LANDLORDS FOR THE PAST THREE (3) YEARS

NAME: ADDRESS: PHONE: LENGTH OF LEASE:

HAVE YOU GIVEN A 30-DAY NOTICE? _____ HAVE YOU EVER BEEN EVICTED? _____
IF SO, FROM WHERE? _____ WHEN? _____
REASON: _____
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL ACT? YES _____ NO _____
IF YES, EXPLAIN IN DETAIL ON THE BACK OF THIS APPLICATION.

EMPLOYMENT

PRESENT EMPLOYER: _____
HOW LONG? _____ POSITION HELD _____
SALARY _____ SUPERVISOR _____
OTHER EMPLOYER _____
HOW LONG _____ POSITION HELD _____
DO YOU HAVE ANY PETS? _____ WHAT TYPE? _____ HOW MANY? _____
CREDIT HISTORY (YOURS) CREDIT HISTORY (OTHER)
BANK / S&L _____ BANK / S&L _____
FINANCE COMPANY _____ FINANCE COMPANY _____
OTHER _____ OTHER _____
AUTO/TYPE _____ LICENSE # _____ STATE _____
AUTO/TYPE _____ LICENSE # _____ STATE _____

NEAREST RELATIVE NOT LIVING WITH YOU

NAME ADDRESS PHONE RELATIONSHIP

I SPECIFICALLY AUTHORIZE THOMAS H. LAGOS AND HIS AGENTS TO CHECK WITH ANY CREDIT REPORTING AGENCY, MY EMPLOYER, PREVIOUS EMPLOYER, PREVIOUS LANDLORDS, OR ANY OTHER SOURCES TO ASCERTAIN WHETHER THOMAS H. LAGOS AND HIS AGENTS WILL RENT TO ME. I UNDERSTAND THAT MY APPLICATION FEE IS NON-REFUNDABLE. IF ANY PART OF THIS AFOREMENTIONED APPLICATION IS NOT CORRECTLY COMPLETED, I AM AWARE THAT THIS MAY BE GROUNDS FOR DENIAL OR FOR EVICTION. THIS APPLICATION WILL BE KEPT ON FILE AND IS GOOD FOR A THIRTY(30)DAY PERIOD FROM DATE LISTED BELOW.

PROPOSED TENANT _____ DATE _____ PROPOSED TENANT _____ DATE _____