

THE WATERFALLS

REFERRED BY _____
APT. # _____

RENTAL APPLICATION

NAME OF APPLICANT: _____

PRESENT ADDRESS: _____

HOME TELEPHONE #: _____ CELL #: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER _____

NAME OF SPOUSE: _____

DATE OF BIRTH: _____ SOCIAL SECURITY NUMBER _____

PLEASE SPECIFY APARTMENT PREFERENCE:

___ 1 BEDROOM GROUND FLOOR

___ 1 BEDROOM UPSTAIRS

___ 2 BEDROOM GROUND FLOOR

___ 2 BEDROOM UPSTAIRS

smoking _____

non-smoking _____

WHAT MONTH IS THE APARTMENT NEEDED: _____

ARE YOU SELLING A HOME? _____ ARE YOU RELOCATING? _____

ARE YOU IN A LEASE? _____ IF SO, WHEN DOES THE LEASE EXPIRE? _____

HOW DID YOU HEAR OF US? _____

IF YOU WERE REFERRED, BY WHOM? _____

CURRENT LANDLORD: _____

ADDRESS: _____

TELEPHONE NUMBER _____ MONTHLY RENT _____

HOW LONG HAVE YOU LIVED AT THIS ADDRESS _____

REASON FOR LEAVING: _____

HAVE YOU EVER BEEN EVICTED, SUED FOR NON-PAYMENT OF RENT, OR BREACHED A LEASE?

THE WATERFALLS

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NAME OF EMPLOYER _____ TELEPHONE _____

ADDRESS: _____

TYPE OF BUSINESS: _____ POSITION: _____

SUPERVISOR: _____ YEARS EMPLOYED: _____ MONTHLY SALARY: \$ _____

(SPOUSE)

NAME OF EMPLOYER: _____ TELEPHONE #: _____

ADDRESS: _____

TYPE OF BUSINESS: _____ POSITION: _____

SUPERVISOR: _____ YEARS EMPLOYED: _____ MONTHLY SALARY: \$ _____

REFERENCES
NAME _____ RELATIONSHIP _____ PHONE _____

NAME _____ RELATIONSHIP _____ PHONE _____

DESCRIBE OTHER INCOME OF APPLICANT:

DESCRIBE OTHER INCOME OF SPOUSE:

SOCIAL SECURITY: \$ _____ PER MONTH

SOCIAL SECURITY: \$ _____ PER MONTH

PENSION: \$ _____ PER MONTH

PENSION: \$ _____ PER MONTH

MISCELLANEOUS: \$ _____ PER MONTH

MISCELLANEOUS: \$ _____ PER MONTH

TOTAL MONTHLY: \$ _____

TOTAL MONTHLY: \$ _____

CHECKING ACCOUNT

NAME OF BANK: _____ ACCOUNT #: _____

ADDRESS: _____ CURRENT BALANCE: \$ _____

SAVINGS ACCOUNT

NAME OF BANK: _____ ACCOUNT #: _____

ADDRESS: _____ CURRENT BALANCE: \$ _____

WE ARE AN EQUAL OPPORTUNITY HOUSING PROVIDER FOR PEOPLE 55 YEARS OF AGE OR OLDER

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE. I AUTHORIZE THE VERIFICATION OF THIS INFORMATION BY CONTACTING ANY OR ALL INDIVIDUALS, FINANCIAL INSTITUTIONS AND CREDIT AGENCIES. I UNDERSTAND THAT THIS IS NOT A LEASE OR AN OFFER TO RENT. NO BINDING OBLIGATION OF ANY KIND EXISTS BETWEEN THE OWNER AND MYSELF UNLESS AND UNTIL A LEASE IS SIGNED. THIS APPLICATION IS SUBJECT TO PRIOR APPLICATIONS. THIS APPLICATION SHALL REMAIN THE PROPERTY OF THE OWNER.

SIGNATURE OF APPLICANT

TODAY'S DATE

SIGNATURE OF SPOUSE

TODAY'S DATE