

FOR AGENT USE ONLY:

Site: _____

RENTAL APPLICATION AGREEMENT

SS#: DRIVERS LIC#: DOB: Garage PRIMARY PHONE: OTHER PHONE: Extras HOME EMAIL: Pet(s): SPOUSES' FULL NAME: DRIVERS LIC#: DOB: Total I SSPULES' DRIVERS LIC#: DOB: ASS' Total I PRIMARY PHONE: DOB: ASS' Total I Applic ALL OCCUPANTS 18 and older must complete an application and be added to the lease. PLEASE LIST ALL OTHER RESIDENTS TO OCCUPY PREMISES: NAME OF RESIDENT RELATIONSHIP PERSONAL REFERENCES: (Use Local When Possible) Name: Address: City: State: Zip: Phone: Name: Address: City: State: Zip: Phone: IN CASE OF EMERGENCY: Name: Relationship: Phone: Zip: ANSWER 'YES' or 'NO' Have you ever been evicted from an apartment or violated a rental agreement or contract? YES NO Have you ever been a defendant/participant in a lavasuit? YES NO Do you intend to use the premises other than a residence? TYES NO Have you ever been convicted of a felony? YES NO Have you ever been convicted of seleny? YES NO Have you ever been convicted of seleny? YES NO Have you ever been convicted of seleny? YES NO Have	
PRIMARY PHONE: OTHER PHONE: Extras HOME EMAIL: Pet(s): SPOUSES' FULL NAME: STEET MOUNTERS LIC#: DOB: LAST DOB! PRIMARY PHONE: OTHER PHONE: Posses HOME EMAIL: OTHER PHONE: Total I All OCCUPANTS 18 and older must complete an application and be added to the lease. AVAIL OTHER RESIDENTS TO OCCUPY PREMISES: NAME OF RESIDENT RELATIONSHIP PRISONAL REFERENCES: (Use Local When Possible) Cover Name: Address: Zip: Phone: City: State: Zip: Phone:	ss:
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SPOUSES' FULL NAME:	:
SS#: DRIVERS LIC#: DOB: Total I Posses SS#: DRIVERS LIC#: DOB: Total I Posses PRIMARY PHONE: OTHER PHONE: OTHER PHONE:	: Value: \$
PRIMARY PHONE:	Term: Value: \$
HOME EMAIL: Single Other Married Widowed Separated Total I	Rent: \$
HOME EMAIL: Single Other Married Widowed Separated	ssion Date:
Applic Other Married Widowed Separated Total I	Deposit Due: \$
ALL OCCUPANTS 18 and older must complete an application and be added to the lease. PLEASE LIST ALL OTHER RESIDENTS TO OCCUPY PREMISES: RELATIONSHIP PROR.	ation Fee Paid: \$
NAME OF RESIDENT RELATIONSHIP PRORESTORY Residence Property Prope	Deposit Paid: \$
NAME OF RESIDENT RELATIONSHIP PROR. M/I CA PROR. Rolode M/I Pa Gas □ PERSONAL REFERENCES: (Use Local When Possible)	LIST 🗆
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City: State: Zip: Phone: Name: Address: City: Phone: Name: State: Zip: Phone: IN CASE OF EMERGENCY: Relationship: Phone: Address: City: State: Zip: ANSWER 'YES' or 'NO' Have you any collection, judgments, or even taken bankruptcy, had property foreclosed, or given deed in lieu thereof? □ YE Have you ever been evicted from an apartment or violated a rental agreement or contract? □ YES □ NO Have you ever been a defendant/participant in a lawsuit? □ YES □ NO Do you intend to use the premises other than a residence? □ YES □ NO Have you ever been convicted of a felony? □ YES □ NO Have you ever been convicted of being a sex offender or designated as a sexual predator? □ YES □ NO Please Explain any 'YES' answers:	Water □ Electric □ Sheet □
Name: Address: City: State: Zip: Phone: IN CASE OF EMERGENCY: Name: Relationship: Phone: Address: City: State: Zip: ANSWER 'YES' or 'NO' Have you any collection, judgments, or even taken bankruptcy, had property foreclosed, or given deed in lieu thereof? □ YE Have you ever been evicted from an apartment or violated a rental agreement or contract? □ YES □ NO Have you ever been a defendant/participant in a lawsuit? □ YES □ NO Do you intend to use the premises other than a residence? □ YES □ NO Have you ever been convicted of a felony? □ YES □ NO Have you ever been convicted of being a sex offender or designated as a sexual predator? □ YES □ NO Please Explain any 'YES' answers:	'enant Folder □
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PETS: □YES □ NO	S □ NO
Type of Pet: Age: Breed: Color: Weight: Name:	
Type of Pet: Age: Breed: Color: Weight: Name:	

YOUR PRESENT AND PRIOR PLACES	OF RESIDENCE (PLEASE GO BACI	K AT LEAST <u>FIVE</u> YEA	ARS)	
PRESENT Address:	City:	State:	Zip: _	
Present Landlord or Mortgagor	Monthly Pa	ayment:		
Month & Year Moved In: Planned	l Move Out: Owner:			
Landlord's or Mortgagor's Phone #:	Reason for	Leaving:		
PREVIOUS Address:	City:	State: Z	ip:	
Previous Landlord or Mortgagor	Monthly I	Payment:		
Month & Year Moved In: Planned	l Move Out: Owner:			
Landlord's or Mortgagor's Phone #:	Reason for Leavi	ing:		
PREVIOUS Address:		City: :	State: Zip:	
Previous Landlord or Mortgagor		Monthly I	Payment:	
Month & Year Moved In: Planned	l Move Out: Owner:			
Landlord's or Mortgagor's Phone #:	Reason for L	Leaving:		
PLEASE GIVE YOUR EMPLOYMENT IN	NFORMATION:			
Applicant's Present Place of Employe	ment:	Work Phone:		
Starting Date: Position:	Supervisor's Na	ame/Phone #:		_
Employer's Address:	City:	State:	Zip:	
Applicant's Weekly Gross Income:				
Spouse's Present Place of Employme	ent:	Work Phone:		_
Starting Date: Position:	Supervisor's Name	e/Phone #:		
Employer's Address:				
Applicant's Weekly Gross Income:				
PLEASE BE SURE TO READ THIS S	SECTION:			
Applicant(s) represents that the statem		rect and hereby autho	orizes verification of re	ferences.
and credit history. The Applicant(s) makes Applications to this application to sign a Lease in the for the sunderstood by the Applicant(s) the approve this Application or to delivery It is understood by the Applicant(s) the An APPLICATION FEE of \$ Applicant(s) execute a Lease in a form writing of his intention to withdraw sate the Landlord with his forwarding address to Lease. It is further understood that upon execution of Deposit requirement under said Lease. It is further understood that in the even herein, of his intentions not to rent, the hours to request an individualized assemove-in or cancels, all monies paid will IN NO EVENT WILL THE APPLICATIO Applicant's Initials: Date: Applicant's Signature	orm presented by the Landlord. at this Application is preliminary or occupancy of the unit. at a copy of the Lease Agreement us and \$	nly and involves no obseed by the Landlord warity Deposit has been as Application is not appon which the Landlord this Applicant (s) informed to the Applicant (s) informed to the Applicant (s). The proved and an address of the Initials PPLICANT (S). Spouse's Signature of the Initials and Initials: Da	poligation of the Landlor will be furnished upon a made by Applicant(s) proved; or (3) Applica d assigns a specific unit lication Fee will not be ms the Landlord, accor . If you are denied base as is assigned, in the event	rd or the Agents of the Landlord to request. to be held by the Landlord unit: (1) nt(s) inform the Landlord in t to the Applicant(s), and provides credited toward the Security rding to the requirements set out ed on criminal history, you have 72
Agent:	Date:			
FOR AGENT USE ONLY:				
APPLICANT'S EMPLOYMENT:				
SPOUSE'S EMPLOYMENT:				
RESIDENCE:				
CREDIT/OTHER:				
OREDIT/OTHER				
DATE ASSIGNED & ACCEPTED BY AP				



Authorization Request

To Whom It May Concern:

I hereby authorize you to release Schottenstein Real Estate Group, for verification purposes, information concerning:

- 1. Employment, dates, title, income, hours worked, etc.
- 2. Banking and Saving Account(s) of record.
- 3. Mortgage loan rating, credit and criminal report; (opening date, high credit, payment amount, loan balance and payment record.)
- 4. Rental history; (Term of Lease, Payment History, Problems and/or any derogatory information.)

Also, I hereby authorize utility service to be established in my name and agree to pay for such service.

This information is for the confidential use of Schottenstein Real Estate Group. A photographic or carbon copy of this Authorization, (being photographic or carbon copy of the signature(s) of the undersigned), may be deemed to be the equivalent of the original and may be used as a duplicate original.

Your prompt response and cooperation to this request is greatly appreciated.

Signature:	 	
Signature:	 	
Signature:		