

REAL ESTATE INFORMATION NETWORK, INC.
RENTAL APPLICATION



The property will be shown and made available to all persons without regard to race, color, creed, religion, national origin, sex, familial status, handicap, or elderliness in compliance with all applicable federal, state and local fair housing laws and regulations.

This Application for Lease (the "Application") is made as of the ____ day of _____, _____ by _____ ("Applicant", whether one or more) through _____ "Agent," who represents Landlord)

Applicant hereby applies for a residential dwelling unit (the "Dwelling Unit") located at _____, for occupancy commencing on _____, 20____ at an initial monthly rent payment of \$_____.

COMPLETE FOR CONSIDERATION

1. **Applicant:** _____ SSN/TIN: _____ Date of Birth: _____
Tel # (H): _____ Tel # (W): _____ Cell #: _____ Email: _____
Current Address: _____ Years: _____
Current Landlord _____ Current Landlord's Tel#: _____
Current Landlord's email _____
Prior Address: _____ Years: _____
Prior Landlord _____ Prior Landlord's Tel# _____
Prior Landlord's email _____
Presently Employed By: _____ How long? _____
Position: _____ Salary \$ _____ Week Month Year
Supervisor: _____ Telephone: _____

2. **Co-Applicant:** _____ SSN/TIN: _____ Date of Birth: _____
 Tel # (H): _____ Tel # (W): _____ Cell #: _____ Email: _____
 Current Address: _____ Years: _____
 Current Landlord _____ Current Landlord's Tel#: _____
 Current Landlord's email _____
 Prior Address: _____ Years: _____
 Prior Landlord _____ Prior Landlord's Tel# _____
 Prior Landlord's email _____
 Presently Employed By: _____ How long? _____
 Position: _____ Salary \$ _____ Week Month Year
 Supervisor: _____ Telephone: _____

3. OTHER INCOME:

Applicant

Amount \$ _____ Week Month Year Source: _____

Co-Applicant

Amount \$ _____ Week Month Year Source: _____

4. Occupants other than Applicant(s):

Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____
 Name: _____ Age: _____ Relationship: _____

5. DEBTS/ASSETS: Complete and list any debts now outstanding (attach additional sheet if necessary).

CREDITOR	ADDRESS	ACCOUNT NO.	MONTHLY PAYMENT

CHECKING ACCOUNT NO.	BANK	ADDRESS
SAVINGS ACCOUNT NO.	BANK	ADDRESS

AUTOMOBILE

MAKE MODEL YR	FINANCED BY AND ADDRESS	MO. PAYMENT	LICENSE #

6. Pet Information:

Pet 1: Name: _____ Species: _____ Breed: _____
 Color: _____ Age: _____ Weight at Full Maturity _____
 Spayed/Neutered: Yes No Current on all inoculations and vaccinations: Yes No

Pet 2: Name: _____ Species: _____ Breed: _____
 Color: _____ Age: _____ Weight at Full Maturity _____
 Spayed/Neutered: Yes No Current on all inoculations and vaccinations: Yes No

Additional Pet Information: _____

7. Check if any of the following are requested to be kept on premises:

Camper Motorcycle Boat Truck Trailer

8. EMERGENCY CONTACT: In case of emergency notify;

Name _____ Address _____
 Phone _____ Relationship _____

Name _____ Address _____
 Phone _____ Relationship _____

Name _____ Address _____
 Phone _____ Relationship _____

9. APPLICATION FEE/APPLICATION DEPOSIT: A non-refundable Application Fee in the amount of \$ _____ accompanies this Application. An Application Deposit of _____ accompanies this Application and will become the Security Deposit upon commencement of the Lease Agreement.

10. Applicant authorizes Agent or Landlord to verify application information. Applicant understands that this may include a credit check and/or background check, the cost of which is included in the Application Fee. Applicant further authorizes Listing Firm to undertake additional credit check and/or background check as a condition of renewal or extension of the original term of the Lease. In the event the results of the credit check or background check are unacceptable to Listing Firm in its discretion, Listing Firm reserves the right to decline the initial term or renewal or extension, as applicable.
11. Applicant acknowledges that the information provided on this form is accurate and correct. Providing false information will subject the applicant to Lease termination.

Applicant	Date
Co-Applicant	Date

<p>For Internal Use</p> <p><input type="checkbox"/> Approved <input type="checkbox"/> Not Approved Date: _____</p> <p>Notes:</p> <div style="border: 1px solid black; height: 30px; width: 100%;"></div>
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