

Leased By: _____

Jefferson Shadows

ONE SITE: _____

Rental Application for Jefferson Shadows

FOR OFFICE USE ONLY

Date: _____

Lease Term (Months): _____

Apt. #: _____

Monthly Rental Rate: _____

Pet (Dog Cat Fee \$ _____

Date of Occupancy (week-day only): _____

APPLICANT INFORMATION (1 Bedroom-2 Occupant Max/2 Bedroom-4 Occupant Max/3 Bedroom-6 Occupant Max)

NAME (FIRST):	(MI):	(LAST):	
DOB:	SSN:	DL #:	STATE:
EMAIL:		CELL #:	

CURRENT ADDRESS:

City:	State:	ZIP Code:
Own Rent Parents (Please circle)	Monthly payment or rent:	How long?
Rental Property Name:	Owner/Managers Phone #:	

PREVIOUS ADDRESS:

City:	State:	ZIP Code:
Owned Rented Parents (Please circle)	Monthly payment or rent:	How long?
Rental Property Name:	Owner/Managers Phone #:	

EMPLOYMENT INFORMATION

Current employer:	Position:	
Employer address:	How long?	
Phone #:	E-mail:	Fax #:
City:	State:	ZIP Code:
Supervisor:	Hourly Salary (Please circle)	Annual income:

EMERGENCY CONTACT: (Immediate family member not residing with you)

Name:	Address:
Relationship:	
Phone #:	City: State: Zip:

OTHER OCCUPANTS: (Under 18 years old)

NAME:	RELATIONSHIP:	DOB:
	SSN:	STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No
NAME:	RELATIONSHIP:	DOB:
	SSN:	STUDENT? <input type="checkbox"/> Yes <input type="checkbox"/> No

PET INFORMATION

Do you have a pet? NO YES Number of pets? ONE TWO Type of pet? CAT (s) DOG (s)

*2 Pet Maximum, Cats & Dogs Only, \$350 pet fee required, Dogs Require Pet Interview

VEHICLE INFORMATION

How many autos, boats, or trailers would you keep at this address? _____

Make/Model:	Color:	Year:	License Tag:	State:
Make/Model:	Color:	Year:	License Tag:	State:

MILITARY: Are you in the Military? Yes No**CRIMINAL HISTORY:** Have you, your spouse, or any occupant listed above ever been convicted of a Felony? Yes No Please indicate the year, location and type of each felony. We may need to discuss more facts before making a decision. (Use Back)

Applicant has deposited herewith the sum of \$____, (DAMAGE DEPOSIT) receipt of which is hereby acknowledged, as a non-interest bearing deposit (and not as a rental payment) to be refunded as hereinafter provided in the lease agreement. In the event the application is approved the applicant fails or refuses to enter into the contemplated lease, owner shall retain the said deposit as liquidated damages to cover the cost of taking and processing this application and removing the premises from the market and holding same for applicant. In the event this application is disapproved for any reason for which owner is responsible the lease agreement is not consummated, this deposit will be returned to applicant. Any faxed copies with signature are deemed to be authorization to run credit and authorizes any release of information for the above mentioned. One application fee of \$60.00 is due per each adult applicant. Application fee(s) are non-refundable. This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by and officer of said company and delivery of a lease covering said premises. Please allow a minimum of 3 to 5 days to process your application for both credit and character references. The above information is correct to the best of my knowledge. I have no objection to inquires for the purpose of verification of the above statement. It is understood that the above information will be held strictly confidential.

Signature of applicant:	Date:
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