

Source: _____

Apartment # _____

Rental Rate _____

Move-in Date _____

Rental Agent _____

Conc: _____

Rental Application-Fairway Vista

Copies of Driver's License and Social Security Card Required!!!

Applicant's Last Name		First	Middle Name	Birthdate	Drivers License No. & State	Soc. Sec. No.
Unmarried [] Married [] Separated []		Spouse's Name		Birthdate	Drivers License No. & State	Soc. Sec. No.
Expected Move-in Date		Apt to be occupied by Adults _____ Children _____		Children's names and ages		
Do you have Pet (s)? [] Yes [] No		How many?		Type & Size (keeping of pets requires a deposit and Owner's consent).		
PART I RESIDENCE HISTORY 2 YEARS						
Present Address				City	State	Zip
				How Long?	Area Code Phone	[] Own [] Rent
Name & Address of Present Landlord or Mortgage Co.				Area Code Phone	Monthly Pymt.	
Previous Residence Address		Previous Landlord or Apt. Community		Area Code Phone	How Long?	
PART II EMPLOYMENT HISTORY 2 YEARS						
Applicant Employed By			Supervisor's Name			How Long?
Address		City	State	Zip	Phone	Position Held/Occupation
						Salary \$ _____ Per _____
Previous Employment			Supervisor's Name			How long?
Address		City	State	Zip	Phone	Position Held/Occupation
						Salary \$ _____ Per _____
Spouse Employed By			Supervisor's Name			How Long?
Address		City	State	Zip	Phone	Position Held/Occupation
						Salary \$ _____ Per _____
Spouse's Previous Employment			Supervisor's Name			How long?
Address		City	State	Zip	Phone	Position Held/Occupation
						Salary \$ _____ Per _____
ADDITIONAL INCOME: Additional income such as child support, alimony, or separate maintenance need not be disclosed unless such Additional Income is to be included for qualification hereunder. Source Amount of \$ _____ per _____				ASSETS Required only if checked here [] Amount \$ _____ Income from assets \$ _____ per _____		
PART III CREDIT AND LOAN REFERENCES						
No. of Vehicles on Property		Do you have any recreational vehicles; vans, boats, motorcycles? If so, please specify				
Auto No. 1 Type		License No.			State	
Financed Thru		Acct. No.			Monthly Pmt	
Auto No. 1 Type		License No.			State	
Financed Thru		Acct. No.			Monthly Pmt	
Loans & Charge Accounts (including Dept. Stores, Credit Cards, etc).						
Owed To		Acct. No.		Address		Zip
						Total Debt
						Payments
						\$ _____ per _____
						\$ _____ per _____
						\$ _____ per _____
						\$ _____ per _____
PART IV BANK REFERENCES						
Name of Bank or Savings & Loans		Acct. No.		Address		City
						State
						Zip
PART V						
Family Physician		Address			City	State
					Zip	Area Code Phone
In Case of Emergency Call		Relationship		Address		City
						State
						Zip
						Area Code Phone

BE ADVISED THAT MONIES TAKEN TO HOLD A UNIT ARE DEPOSITED ON A DAILY BASIS. IF MONIES ARE DUE TO BE REFUNDED, A REFUND WILL BE MADE TO YOU IN 14 BUSINESS DAYS.

Amounts Received: \$ _____ Non refundable application fee

Separate: \$ _____

Money Order or Cashier's Check!!! Holding deposit to be applied toward payment of security deposit upon approval of application. If no security deposit is due holding deposit will be applied toward rent or any other amounts due. If I cancel after _____ hours or refuse to occupy the premises on the agreed upon date. I understand and agree that this holding deposit will be forfeited.

I certify that the information given herewith is complete and correct. I authorize Owner or owner's agent to verify the accuracy of these statements, to communicate with my employer and creditors, and to procure such other information which may be required to evaluate this application. False or derogatory information stated on this application may constitute grounds for rejection of this application and forfeiture of deposits and may constitute as criminal offenses under laws of this State.

Applicant's Signature _____ Applicant's Signature _____

Date _____ Date _____

RECEIVED BY _____ Date _____