Rental Property Address

The undersigned hereby makes an application to rent the following property:

RENTAL APPLICATION

Equal Housing Opportunity

270-217-0127 270-217-8886

Anticipated move date of	at a monthly rent of \$an		d security deposit of \$			
PLEASE TELL US ABOUT YOURSE	LF					
Full Name	Home Phone ()					
Date of Birth	Social Security #					
Email Address:	(Other Phone ()				
Co-Applicant Name		Names of Dependents				
Co-Applicant Date of Birth	Social Security	Social Security #				
Dependents Date of Birth				·····		
List All Pets						
PLEASE GIVE RESIDENTIAL HISTO	RY (LAST 3 YEARS)					
Current Address	Apt#	City	State	Zip		
Month/Year Moved In	Reasons for Leaving		R	ent \$		
Owner/Agent		Phone ()			
Previous Address (last 3 years)			Rent	t \$		
Owner/Agent		Phone ()			
PLEASE DESCRIBE YOUR CREDIT	HISTORY					
Have you declared bankruptcy in the p	oast seven (7) years?	Yes	No	<u> </u>		
Have you ever been evicted from a re	Yes	No	<u></u>			
Have you had two or more late rental	Yes	No				
Have you ever willfully or intentionally	Yes	No				
PLEASE PROVIDE YOUR EMPLOY	MENT INFORMATION					
Your Status:Full TimeP	art TimeStudentUne	employed				
Employer						
Dates employed						
Supervisor Name		Phone ()			
Salary \$per	(If employed by above less that	an 12 months, gi	ve name & phone of	previous		
school:				.)		

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$	Source/Contact Name			
PLEASE LIST YOUR REFERE	NCES			
Checking Account	Institution or Bank Name Balanc			
Personal Reference or Emerg	ency Contact:			
Name	Address			
Phone	Relationship			
Driver's License:				
Your Driver's License Number_	State_			
Vehicle Information:				
Make / Model	Year	License Plate	State	
ADDITIONAL INFORMATION:				
Please give any additional infor	mation that might help own	-		
Where may we reach you to dis	cuss this application?			
Day Phone # ()	Nig	ght Phone # ()	
I hereby apply to lease the above descr of each month in advance. As an induce true; however, should any statement ma time, and effort in processing my applica	ement to the owner of the property ade above be a misrepresentation	and to the agent to a	ccept this application. I warra	ant that all statements above set forth a
The above information, to the be	est of my knowledge, is true	e and correct.		
Please sign: X Name of <i>i</i>	Applicant	Date	9	
		UTHORIZATION ase of Informatic	'n	
I authorize an investigation of m condominium from this owner/m		king and employn	ient for the purposes o	f renting a house, apartment, or

Name (please print)