

FORM 5-3 Rental Application

[company logo, name, and address]

Property	Apartment No.	Type	Rent Amount
Occupancy Date	Lease Term	How Learned About Apt.?	Security Deposit

Name	Social Security No.	Date of Birth
Present Address (A)	Telephone No.	How Long? _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own Monthly Payment _____
Reason for moving?		
Name of Owner or Agent	Telephone	
Previous Address (B) (complete if at current address less than 2 years)	Telephone No.	How Long? _____ <input type="checkbox"/> Rent <input type="checkbox"/> Own
Reason for Moving?		
Name of Owner or Agent	Telephone	
In case of emergency, notify:	Telephone	Relationship

Present Employer (A)	Telephone	From	To
Address	Position	Salary \$ _____ per _____	
Previous Employer (B) (complete if at current job less than 2 years)			
	Telephone	From	To
Address	Position	Salary \$ _____ per _____	

(continued)

Name of Spouse*	No. of Children	Ages of Children	
Spouse's Present Employer	Telephone	From	To
Address	Position	Salary \$ _____ per _____	
Will anyone other than spouse and children listed above reside with you? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify:			

Name of Bank	Address or Branch	Checking Acct. No.	
		Savings Acct. No.	
Credit Reference	Type/Address	Mo. Payment	Acct. No./Telephone
Credit Reference	Type/Address	Mo. Payment	Acct. No./Telephone
Credit Reference	Type/Address	Mo. Payment	Acct. No./Telephone
Other Financial Commitments			

Personal Reference		How Long?	Telephone
Personal Reference		How Long?	Telephone
Driver's License No.	State	Financed by Whom?	Monthly Payment
Year, Automobile Make, Model		Registration No.	State
Do you have any recreational vehicles, cars, boats, motorcycles? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please specify:			

• Non-married co-applicants must file separate applications.

I recognize that this application for an apartment is subject to acceptance or rejection.

I hereby state that the information set forth above is true and complete and authorize verification of the information and references given. Should any statement made above be a misrepresentation or untrue, \$ _____ of the deposit will be retained as compensation to the agent for holding the apartment off the market.

If application is accepted, lease is to be executed at agent's office within _____ days after applicant is notified of such acceptance. At this time, deposit will be credited as part of the security deposit. If applicant is not accepted as a resident within _____ days, the deposit will be returned, except as otherwise noted.

If application is accepted and applicant does not sign lease within the above prescribed days after notification, the deposit will be forfeited as liquidated damages in payment for holding the apartment off the market.

I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

Nonrefundable Application/
Credit Check Fee: _____ Date: _____, 19____

\$ _____

Deposit: \$ _____

[owner or agent]

Applicant

By: _____
Authorized Agent

Spouse

FOR OFFICE USE ONLY

ACCEPTED REJECTED

	By	Date
Reviewed	_____	_____
Approved	_____	_____
Reviewed	_____	_____