

RENTAL CREDIT APPLICATION

ate:	
equested Move In Date:	
roperty Address:	
EDCONAL INFORMATION	
ERSONAL INFORMATION	
Applicant's Name:	Email Address
	Date of Birth:
	State Issued:
Mothers Maiden Name:	
Home Phone:	Work Phone:
Cell Phone:	Names:
How Many Pets? Breed:	Names:
Current Address:	
	State: Zip Code:
How Long At Address:	
Mortgage Co's/Landlord's Name:	
Mortgage Co's/Landlord's Phone:_	Fax #:
Current Rent/Mortgage: \$	/mo
Prior Address:	
City:	State: Zip Code:
How Long At Address:	Do You: Ï Rent Ï Own
Mortgage Co's/Landlord's Name:	
Mortgage Co's/Landlord's Phone:_	Fax #:
Current Rent/Mortgage: \$	
Current Employer:	
Address:	
City:	State: Zip Code:
	How Long:
	Supervisor's Phone:
	(Includes alimonies, child support, etc.
NANCIAI INDODMATION	
NANCIAL INFORMATION Financial Institution/Bank Name:	
Type of Account:	
	Telephone #:
City: States	:: Zip Code:
City State.	Zip Couc
THER INFORMATION	
	State/Tag #:
Year/Make/Model of Car:	State/Tag #:
Have You Ever Filed Bankruptcy?	Y N If "Yes" when?
Have You Ever Been Served a Notice	ice to Vacate? Y N If "Yes" when?
	N If "Yes" explain:



SPOUSE INFORMATION

Spouse Name:	E	mail Address
		ate of Birth:
		tate Issued:
Mothers Maiden Name:		
Work Phone:	C	ell Phone:
Employer:		
Address:		
City:	State:	Zip Code:
Position:	How 1	Long:
Supervisor's Name:		Supervisor's Phone:
Annual Salary: \$		(Includes alimonies, child support, etc.)
REFERENCES At Least One Reference Mu	st Be Someone Other T	han A Family Member.
		•
Name:	Relation:	Telephone #:
Name:	Relation:	Telephone #:
Name:	Relation:	Telephone #:
any and all references. I/WE understand that an applicate married applicant will be charged. Also, a holding deposit in the amount of the form of th	ion fee of \$40.00 per ed and is NOT refund ount of \$200.00 is req	single applicant and \$65.00 for a able. uired to hold the property and will be ason or if the required information is not ration is rejected, the entire holding deposit
Applicant's Signature	Date	
Spouse's Signature	Date	



CONSENT FORM

I hereby authorize AMSties on behalf of Blake Densmore to receive any criminal history record, information pertaining to me which may be in the files of any state or local criminal justice agency.

PLEASE PRINT CLEARLY AND COMPLETE ALL BLANKS

Street Address		
City, State, Zip Code		
Date of Birth Social	Security Number Drivers	License No.
nan two years at curre	ent address, provide previous	address:
Street Address		
Succe Address		