



COPY OF PHOTO ID IS REQUIRED IN ORDER TO PROCESS THIS APPLICATION

Application will not be processed if application is not complete

Each personal guarantor and each occupant 18 years old and over must submit a separate application

Rental Application

Building Name/Address/Apartment Number: _____

1 Bedroom

2 Bedroom

3 Bedroom

Personal Information

Name: _____ Soc. Sec. #: _____ Date of Birth: _____
(First) (M) (Last)

Address: _____ City, State, Zip: _____ Phone #: _____

Email Address: _____ Driver's License: _____ State: _____

Employment/Income Verification

Current Employer: _____ Position: _____ Contact Name: _____

Employer Address: _____ City/State/Zip: _____

Phone #: _____ Start Date: _____ Salary/Month: \$ _____

Current Employer: _____ Position: _____ Contact Name: _____

Employer Address: _____ City/State/Zip: _____

Phone #: _____ Start Date: _____ Salary/Month: \$ _____

Emergency Contacts (Shouldn't include anyone living in apartment)

Name: _____ Relation: _____ Phone: _____

Address: _____ City/State/Zip: _____

Name: _____ Relation: _____ Phone: _____

Address: _____ City/State/Zip: _____

Vehicle Information

Vehicle #1: Make/Model _____ Year/Color _____ License Plate # _____

Vehicle #2: Make/Model _____ Year/Color _____ License Plate # _____

Other Occupants

Name	Relationship	Age/DOB	Phone	Email Address

Residence History

(Please provide at least 3 years of residency information)

Present Address: _____ **City/State:** _____ **Zip Code:** _____

Actual Dates: _____ **Reason for Leaving:** _____

Landlord Name: _____ **Landlord Phone:** _____

Previous Address: _____ **City/State:** _____ **Zip Code:** _____

Actual dates: _____ **Reason for Leaving:** _____

Landlord Name: _____ **Landlord Phone:** _____

Are you at least 18 years of age? Yes _____ No _____

The undersigned represent that all of the above statements are true and complete and hereby authorize management, its' Employees and agents to contact and obtain information from any individuals or entities that may have information regarding credit history, banking information, employment and past residential arrangements of the undersigned. The undersigned specifically authorizes management, its employees and agents to contact and obtain information from financial institutions regarding the status of checking and savings accounts. In addition, management will investigate whether prospective resident(s) has registered as a convicted sex offender. The undersigned hereby Indemnifies and holds harmless Management, its employees and agents and all other individuals or entities contacted by Management from all cause of action, expense, losses or damages of any kind arising from or related to any information obtained regarding the undersigned. **“All persons will be treated fairly and equally without regard to race, color, religion, sex, familial status, handicap, marital status, national origin or status with respect to public assistance in compliance with the Fair Housing Act.”** This application is preliminary only and does not obligate Management to deliver possession or keys to the premises. Any false statement on this application may result in rejection of your application in immediate termination of you lease. No contract will be established between the parties until a lease agreement has been signed by all parties **\$40.00 Non-Refundable Processing Fee per Applicant. Make Checks Payable to CVPM.**

Applicants Signature

Date

_____ Accepted (Met Criteria) _____ Denied (Did not meet Criteria)

Reason Denied: _____ Letter sent (Fair Credit Reporting Act): _____

Criminal History

Have you ever been convicted of or pleaded guilty or “no contest” to a misdemeanor (whether or not resulting in a conviction)?

YES _____ NO _____

Have you ever been convicted of or pleaded guilty or “no Contest” to a felony (whether or not resulting in a conviction)?

YES _____ NO _____

Have you ever been ordered to sign a Pre-trial Diversion Agreement?

YES _____ NO _____

Have you ever been convicted of or plead guilty or “no contest” to a misdemeanor involving sexual misconduct (Whether or not resulting in a conviction)?

YES _____ NO _____

Have you ever been convicted of or plead guilty or “no contest” to a felony involving sexual misconduct (Whether or not resulting in a conviction)?

YES _____ NO _____

Are you currently registered or have you ever registered as a sex offender?

YES _____ NO _____

If you answered YES to any of these questions, please explain below:

Offense (Please Describe)	Felony or Misdemeanor	Sentence	Date Sentenced	Probation Ends

The undersigned represent that all of the above statements are true and complete. The undersigned specifically authorizes Management, its’ employees and agents to investigate whether prospective resident(s) has registered as a convicted sex offender. The undersigned hereby indemnifies and holds harmless management, it employees and agents and all other individuals or entities contacted by management from all causes or action, expenses, losses or damages of any kind arising from or related to any information abstained regarding the undersigned. **“All persons will be treated fairly and equally without regard to race, color, religion, sex, familial status, handicap, marital status, national origin or status with respect to public assistance in compliance with the Fair Housing Act.”** Application does not obligate Management to deliver possession or keys to the premises. **Any false statement on this application may result in rejection of your application or immediate termination of your lease.** No contract will be established between the parties until a lease agreement has been signed by all parties.

 Application Print

 Applicant Signature

 Date

****All areas must be completed or the application will not be processed****

Rental Reference Verification and Release

Applicant: Please fill out this top portion for the rental reference and sign the release

Date: _____

Company: _____

Attn.: _____

Phone: _____

Fax: _____

We would greatly appreciate your help in verifying a rental reference for the following individual(s). Your prompt reply by fax or phone would be greatly appreciated. Thank you

Applicant Information

Name: _____

Address: _____

Apartment No.: _____

City/State/Zip: _____

Permission for release of information

I authorize you to furnish the information requested below

Signature: _____

Date: _____

**** Please do not fill out the bottom portion; we will submit it to your current landlord**

LANDLORD: PLEASE ANSWER THE FOLLOWING QUESTIONS

Resident's Move In Date: _____ Move Out Date: _____

Pay their rent on time? YES NO
If no, how many times were they late?

Take Proper Care of the Rental Unit and Grounds YES NO

Ever have pets in the rental unit without consent of landlord YES NO

Allowed individuals other than household members to live in the unit YES NO

Did tenant or guest disturb their neighbors? YES NO

Has law enforcement been in the residents unit that you are aware of? YES NO
If yes, explain:

Was proper notice given to vacate YES NO

Was there unpaid rent or damage? YES NO

Are you evicting the tenant YES NO

Would you rent to them again? YES NO

Signature: _____

Date: _____