

# The Peterson Companies RENTAL APPLICATION for Residents and Occupants

(Each co-applicant and each occupant over 18 years old must submit a separate application. Spouses may submit a single application.)

**Thank you for showing interest in our Community. Help us to speed your application processing by providing the following requested information on the front and back of this form completely and accurately.**

## First, please answer this brief application survey:

Were you referred to our Community by a locator service? yes no If yes, please state agent's name and company: \_\_\_\_\_  
Did a resident refer you? yes no If yes, please state resident's name \_\_\_\_\_ *If none of the previous apply,*  
**how did you first hear or come to know about this Community?** (Check all that apply) newspaper ads, yellow pages, drive by/signs, Internet, Apartment Guide, For Rent Magazine, word of mouth, other apt. community, other Peterson community, other, please explain \_\_\_\_\_

## APPLICANT INFORMATION AND RENTAL / HOUSING HISTORY

Please tell us about you and any previous rental/housing history: Your full name: \_\_\_\_\_

Former last names (exactly as on driver's license or government ID card, including maiden and/or married) \_\_\_\_\_

Your social security # \_\_\_\_\_ Birthdate: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_ yrs. Your sex: Male Female

Applicant's marital status (Please check one): single married divorced widowed separated

Your present address: \_\_\_\_\_

(WHERE YOU LIVE NOW) Street # & Name Apt. # City/State/Zip

Home phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Pager # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Home E-MAIL address: \_\_\_\_\_ Name of rental community where you live now (If applicable): \_\_\_\_\_

Current owner, Manager, or Mortgage holder name: \_\_\_\_\_ Their phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Date you moved in: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current pmt./mo. \$ \_\_\_\_\_ Why are you moving? \_\_\_\_\_

Any other prior rental history? \_\_\_\_\_ Name of owner/ Manager: \_\_\_\_\_

Street # & Name Apt. # City/State/Zip

Their phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Date moved in \_\_\_\_/\_\_\_\_/\_\_\_\_ Date you moved out \_\_\_\_/\_\_\_\_/\_\_\_\_ Monthly rent? \$ \_\_\_\_\_ Why did you move? \_\_\_\_\_

Any other prior rental history? \_\_\_\_\_ Name of owner/ Manager: \_\_\_\_\_

Street # & Name Apt. # City/State/Zip

Their phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Date moved in \_\_\_\_/\_\_\_\_/\_\_\_\_ Date you moved out \_\_\_\_/\_\_\_\_/\_\_\_\_ Monthly rent? \$ \_\_\_\_\_ Why did you move? \_\_\_\_\_

**Have you or persons to occupy the apartment been evicted, breached a rental agreement, or had a legal judgement rendered for damage to rental property?** YES NO

**Will you or any occupant plan to have a pet/animal at anytime during occupancy?** YES NO **IF YES,** Note #, type, weight, &

age: \_\_\_\_\_ (Handicap assistance animals used by persons with disabilities are not considered pets.)

## APPLICANT'S EMPLOYMENT AND INCOME

Please tell us about your employment and income: Present employer Company name: \_\_\_\_\_

Present employer address: \_\_\_\_\_ Supervisor's name: \_\_\_\_\_

Street # & Name P.O. box or suite # City/State/Zip

Employer's phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Your work phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Present job or dept.: \_\_\_\_\_ Employment start date: \_\_\_\_\_ Gross monthly income by this employer is \$ \_\_\_\_\_

Any other income? YES NO **If yes,** list source(s) and amount(s): \_\_\_\_\_

Previous employer name: \_\_\_\_\_ Previous employer address: \_\_\_\_\_

Previous employer phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Start date \_\_\_\_/\_\_\_\_/\_\_\_\_ Date ended \_\_\_\_/\_\_\_\_/\_\_\_\_ Street # & Name City/State/Zip

## IF APPLICABLE, APPLICANT'S SPOUSE INFORMATION, EMPLOYMENT, AND INCOME

Please tell us about your spouse: Spouse's full name: \_\_\_\_\_ (include wife's maiden name if married less than 2 yrs.)

Spouse's social security # \_\_\_\_\_ Spouse's birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Spouse's driver's license # \_\_\_\_\_ State issued: \_\_\_\_\_ or government ID Card # \_\_\_\_\_

Spouse's employer name: \_\_\_\_\_ Spouse's employer address: \_\_\_\_\_

Spouse's supervisor's name: \_\_\_\_\_ Street # & Name P.O.Box or Suite # City/State/Zip

Spouse's employer phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Spouse's phone # at work (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Spouse's job or dept.: \_\_\_\_\_

Spouse's gross monthly employment income is \$ \_\_\_\_\_ Any other income? YES NO **If yes,** list source(s) and amount(s) of all other income: \_\_\_\_\_

## CREDIT HISTORY OF APPLICANT AND (if applicable) SPOUSE

Please tell us about your credit: List your major loans, credit cards, and/or credit references: 1. \_\_\_\_\_

2. \_\_\_\_\_ 3. \_\_\_\_\_ 4. \_\_\_\_\_

5. \_\_\_\_\_ 6. \_\_\_\_\_ 7. \_\_\_\_\_

Bank Reference Name \_\_\_\_\_ Account # \_\_\_\_\_ Checking or Savings? \_\_\_\_\_

Bank address: \_\_\_\_\_ Street # & Name City/State/Zip Their Phone # (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Have you (or your spouse) ever owned a home? YES NO Any past credit problems you wish to disclose at this time? (Use separate sheet if needed)

## APPLICANT AND OCCUPANT CRIMINAL HISTORY

Please answer the following question: **Have you or persons to occupy apartment been convicted of a felony or sex-related crime?** YES NO

## OTHER OCCUPANTS INFORMATION

Please list names, sex, age, and relationship to applicant of all persons less than 18 years of age and other adults who will be occupying apartment.

Full name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Full name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Full name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

Full name: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Relationship: \_\_\_\_\_

## VEHICLE INFORMATION

Please list all vehicles to be parked on the premises by applicant, spouse, or any other occupants. This includes cars, trucks, motorcycles, trailers, boats, etc. Continue on separate page if more than three vehicles are to be parked on the premises at any time.

Make/model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ License tag/registration # \_\_\_\_\_ State registered: \_\_\_\_\_

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Make/model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ License tag/registration # \_\_\_\_\_ State registered: \_\_\_\_\_

## APPLICANT EMERGENCY CONTACT INFORMATION

Please provide an emergency contact person, over 18 years of age, who will not be living in the apartment.

Emergency contact's full name: \_\_\_\_\_ Their Home address: \_\_\_\_\_

Emergency contact's Work phone # (\_\_\_\_) \_\_\_\_\_ Home phone # (\_\_\_\_) \_\_\_\_\_ Street # & Name City/State/Zip Cell phone # (\_\_\_\_) \_\_\_\_\_

Emergency contact's relationship to applicant: \_\_\_\_\_

Turn form over to view the Rental Application certifications, authorizations, acknowledgments, recognition, declarations, agreements, and understandings of applicant(s) for your signature(s).

**For Leasing Office Use Only:**

**SSI PROFILE #** \_\_\_\_\_

Apt. Community Name: \_\_\_\_\_ Address: \_\_\_\_\_ Building # \_\_\_\_\_  
Apt. # \_\_\_\_\_ Unit type: \_\_\_\_\_ Desired move in date \_\_\_\_/\_\_\_\_/\_\_\_\_ Lease term from \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
Monthly rent \$ \_\_\_\_\_ Other monthly amenity payments: \_\_\_\_\_  
Applicant's current valid drivers license # \_\_\_\_\_ State issued: \_\_\_\_\_  
Applicant's address on driver's license or government ID card: \_\_\_\_\_  
Street # & Name \_\_\_\_\_ Apt. # \_\_\_\_\_ City/State/Zip \_\_\_\_\_

**RENTAL APPLICATION CERTIFICATIONS, AUTHORIZATIONS, ACKNOWLEDGEMENTS, RECOGNITIONS, DECLARATIONS, AGREEMENTS, AND UNDERSTANDINGS OF APPLICANT(S)**

This will **certify** that only those applicants and occupants mentioned above will occupy the premises.

I (we) **authorize** the above named Apartment Community (Landlord) to verify the above information by all available means. Acceptance of this application and any monies deposited herewith is **acknowledged** as not binding upon Landlord until application is approved by Landlord in writing below. By signing below, applicant(s) **recognize(s)** that an investigative report may be prepared whereby information is obtained through interview. This inquiry includes information as to character, general reputation, credit, and mode of living. Landlord is not required to re-verify or investigate preliminary findings. Applicant has the right to make a written request within a reasonable period of time to receive additional information about the nature and scope of this investigation requested of a reporting agency.

Applicant(s) **declare** that all statements made above are true and complete. If applicant(s) failed to answer or provided any information requested above or has given false information, we may disapprove the application, retain all application fees and deposits as liquidated damages for our time and expense, and immediately terminate your Lease and right of occupancy.

I/We hereby make application for the above described apartment. With the execution of this application I/We have paid an earnest money security deposit of \$ \_\_\_\_\_ by personal check, money order, or cashiers check, which I/We **agree** said amount shall be applied as follows:

- A. The earnest money security deposit will be refunded if the application for the above described apartment is disapproved by Landlord.
- B. \$ \_\_\_\_\_ processing fee will be deducted from the earnest money security deposit if the application for the above described apartment is canceled by the applicant within five (5) days from the **received dated\*** of this application. If the application is canceled by the applicant after five (5) days from the **received date\*** of this application, the entire earnest money security deposit will be retained by the Landlord as a reasonable estimate of actual damages incurred by the Landlord.
- C. Prior to the processing of the Rental Application, a \$ \_\_\_\_\_ application fee will be paid by applicant(s) which is a non-refundable fee whether the application is approved or not.

**I (we) have read the forgoing, and understand this application is submitted for the purpose of inducing approval of this application in my/our behalf. I (we) also understand that The Civil Rights Act of 1968, as amended by the Fair Housing Act of 1988 prohibits discrimination in the rental of housing based on race, color, religion, sex, handicap, familial status, or national origin. The landlord does not discriminate in rental housing based on race, color, religion, sex, handicap, familial status, or national origin.**

Applicant's signature	Print name	Date
Applicant's spouse's signature	Print name	Date
Management representative	<b>*Application received date</b>	

**APPLICATION VERIFICATION FOR LEASING OFFICE USE ONLY**

Name of Renters Screening Employee: \_\_\_\_\_ Date turned in \_\_\_\_\_ Time \_\_\_\_\_  
Name of Renters Screening Employee: \_\_\_\_\_ Date reported back \_\_\_\_\_ Time \_\_\_\_\_  
File #: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Age \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Age \_\_\_\_\_

Verified applicant's employment at: \_\_\_\_\_ Spoke with: \_\_\_\_\_  
Salary verified: \$ \_\_\_\_\_ Start date: \_\_\_\_\_ Satisfactory employee?  Yes  No Layoff within 90 days?  Yes  No

Verified applicant's spouse employment at \_\_\_\_\_ Spoke with: \_\_\_\_\_  
Salary verified: \$ \_\_\_\_\_ Start date: \_\_\_\_\_ Satisfactory employee?  Y  N Layoff within 90 days?  Yes  No

Bank references: Checking Account open date: \_\_\_\_\_ Rating \_\_\_\_\_ Satisfactory?  Yes  No  
Savings Account open date: \_\_\_\_\_ Rating \_\_\_\_\_ Satisfactory?  Yes  No  
Spoke with: \_\_\_\_\_ Comments: \_\_\_\_\_

Verified present residence at: \_\_\_\_\_ Spoke with: \_\_\_\_\_  
Length of stay: \_\_\_\_\_ mos. Rent pmt.: \$ \_\_\_\_\_ # times late or any NFS? \_\_\_\_\_  
Condition of premises? \_\_\_\_\_ Noise complaints?  Yes  No Written notice to vacate?  Yes  No Rent to again?  Yes  No  
Additional remarks: \_\_\_\_\_

Verified previous residence at: \_\_\_\_\_ Spoke with: \_\_\_\_\_  
Length of stay: \_\_\_\_\_ mos. Rent pmt.: \$ \_\_\_\_\_ # times late or any NFS? \_\_\_\_\_  
Condition of premises? \_\_\_\_\_ Noise complaints?  Yes  No Written notice to vacate?  Yes  No Rent to again?  Yes  No  
Additional remarks: \_\_\_\_\_  
Other previous residences verified: \_\_\_\_\_

Credit report attached.  
Notes: \_\_\_\_\_  
Credit acceptable within Occupancy standards?  Yes  No

Application approved  Application disapproved  
By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ (a.m./p.m.)

Applicant notified of approval or disapproval by:  Phone  Letter  Other: \_\_\_\_\_  
Additional comments and notes: \_\_\_\_\_