

Bldg. # _____ Address _____ Apt. # _____
 Garage # _____ Storage # _____
 Rental Amount _____
 Furniture Pkg. _____
 Amt. _____
 Move In Date _____

LEASE APPLICATION FOR



Management Corporation

Name of Community _____
 Security Deposit Due: _____
 Credit Check _____ Paid _____
 Administrative Fee _____ Paid _____

APPLICANT (Two Years Consecutive History)

NAME	Last	First	Middle Initial	Social Security No.
PRESENT ADDRESS	Number	Street	Apt. No.	City / State
				Zip Code
Landlord / Mortgage Company	Address		Phone No.	Dates of Residency
				Monthly Rent
PREVIOUS ADDRESS	Number	Street	Apt. No.	City / State
				Zip Code
Landlord / Mortgage Company	Address		Phone No.	Dates of Residency
				Monthly Rent
DRIVER'S LICENSE NO.			DATE OF BIRTH	TOTAL # OF PERSONS TO OCCUPY APARTMENT
YOUR HOME PHONE NO.			YOUR WORK PHONE NO.	
PET INFORMATION	Type	Breed	Weight	Age
				Fee

PERSONS TO OCCUPY APARTMENT OTHER THAN APPLICANT

Full Name	Birthdate	Sex	Relationship
Full Name	Birthdate	Sex	Relationship
Full Name	Birthdate	Sex	Relationship

EMPLOYMENT INFORMATION (Two Years Consecutive History)

Present Employer	Type of Business	Position / Title	Dates of Employment
Address	City / State	Zip Code	Immediate Supervisor and Phone Number
			Monthly Gross Salary
Previous Employer	Type of Business	Position / Title	Dates of Employment
Address	City / State	Zip Code	Immediate Supervisor and Phone Number
			Monthly Gross Salary

SPOUSE

NAME	Last	First	Middle Initial	Social Security No.
Present Employer	Type of Business		Position / Title	Dates of Employment
Address	City / State	Zip Code	Immediate Supervisor and Phone Number	Monthly Gross Salary
Previous Employer	Type of Business		Position / Title	Dates of Employment
Address	City / State	Zip Code	Immediate Supervisor and Phone Number	Monthly Gross Salary

WORK PHONE NO.	DRIVERS LICENSE NO.	DATE OF BIRTH
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ADDITIONAL INCOME

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation.

Amount \$	Source
Please Explain	

CREDIT

CREDIT ACCOUNTS	1.	#	2.	#
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BANK REFERENCES

CHECKING ACCOUNT AT:	BRANCH:	ACCOUNT NO.:
SAVINGS ACCOUNT AT:	BRANCH:	ACCOUNT NO.:

AUTOS

VEHICLE #1	MAKE	MODEL	YEAR	LIC #
VEHICLE #2	MAKE	MODEL	YEAR	LIC #
VEHICLE / MOTORCYCLE #3	MAKE	MODEL	YEAR	LIC #

MISCELLANEOUS INFORMATION

How did you hear about our community?	What features attracted you to us?		
Name and Address of Relative / Friend to contact in case of emergency?	Relationship	Phone No.	
Have you ever been evicted / foreclosed on? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		

I have read this entire application and all of the above information is true. Any misrepresentation or omission of facts on this application is cause for rejection of this application and / or termination of the lease including forfeiture of the deposit. I understand that this is not binding on behalf of RMK or its apartment community, but is subject to management's approval. I understand that the \$60 application fee(s) and the \$150 administration fee in non-refundable. Should this application be denied, only the administration fee will be refunded. A fee of \$50 shall be paid by the applicant for each returned check. Failure to execute a lease once this application has been approved by management will result in the property retaining the entire fee. I also give my permission to have any of the above information verified by generating reports from any credit reporting agency.

Signature: _____ Date: _____ Signature: _____ Date: _____
 Leasing Consultant: _____ Date: _____ Mgr. Approval: _____ Date: _____