

Tiffany Place Apartments
Rental Application

Date: _____
Agent: _____

PLEASE TELL US ABOUT YOURSELF

Full Name: _____ Home Phone: () _____
Date of Birth: _____ Social Security#: _____ - _____ - _____
Driver's License#: _____ State Issued: _____
Cell Phone: () _____

PERSONS TO OCCUPY APARTMENT: (Including children)

Name: _____	S/S#: _____	-	-	DOB: _____
Name: _____	S/S#: _____	-	-	DOB: _____
Name: _____	S/S#: _____	-	-	DOB: _____
Name: _____	S/S#: _____	-	-	DOB: _____

PET INFORMATION: Breed: _____ **Color:** _____ **Weight:** _____ **Age:** _____

RESIDENTIAL HISTORY (LAST 2 YEARS)

Current Address: _____ Apt#: _____
City: _____ State: _____ Zip: _____
How long? Year(s): _____ Month(s): _____ Rent: _____ Monthly/Weekly? _____
Community Name/Landlord: _____ Phone: () _____

Previous Address: _____ Apt#: _____
City: _____ State: _____ Zip: _____
How long? Year(s): _____ Month(s): _____ Rent: _____ Monthly/Weekly? _____
Community Name/Landlord: _____ Phone: () _____

EMPLOYMENT INFORMATION

Current Employer: _____ Phone: () _____
Address: _____ City: _____ State: _____ Zip: _____
Position: _____ How long? Year(s): _____ Month(s): _____
Monthly Gross Income: \$ _____ Supervisor/Contact Name: _____

If employed by above less than 12 months, give name & phone of previous employer:

Previous Employer: _____ Phone: () _____
Address: _____ City: _____ State: _____ Zip: _____
Position: _____ How long? Year(s): _____ Month(s): _____
Monthly Gross Income: \$ _____ Supervisor/Contact Name: _____

Previous Employer _____ Phone() _____
Address: _____ City: _____ State: _____ Zip: _____
Position: _____ How long? Year(s): _____ Month(s): _____
Monthly Gross Income: \$ _____ Supervisor/Contact Name: _____

* If you do not have current employer or are self employed you might be asked to provide a bank statement in which has 6 months of living expenses or provide a previous year's tax statement of your current business.

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PERSONAL REFERENCE:

Name: _____ Phone: () _____

IN CASE OF EMERGENCY, NOTIFY:

Name: _____ Phone: () _____

Relationship: _____

Name: _____ Phone: () _____

Relationship: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS

Have you declared or filed for bankruptcy in the past seven (7) years? Yes _____ No _____

Have you ever been evicted from a rental residence? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent due for any reason? Yes _____ No _____

Have you ever been arrested, convicted or pleaded guilty or no contest to a felony or misdemeanor as defined by applicable laws? Yes _____ No _____

If yes, please explain:

As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true and correct to the best of my knowledge, however, should any statement made above be a misrepresentation or not a true statement of facts, all of the Fees including cleaning fee will be retained to offset the agent's cost, time, and effort in processing my application.

Non Refundable Processing Fee: On signing this application, the Applicant will pay landlord a processing fee in the sum of \$ _____. I understand the application charge is for processing the application and shall not be returned for any reason. I understand the cleaning fee in the sum of \$ _____ is not refundable unless my application is denied or I choose to cancel my application in writing within 24 hours of submission of application offer. I understand that any refunds due will be returned via US Mail and may take up to 2-4 weeks from the date of denial of application.

I authorize the owner/manager and his/her/its employees and agents to verify said information in person, by mail, phone, fax or otherwise, to help determine my rental, credit, financial, employment and character standing. I hereby release the owner, his/her/its employees and agents, The First American Registry, Inc., its employees and agents and any and all firms or persons investigating or supplying information, from any liability whatsoever concerning the release and/or use of said information and further, will defend and hold them all harmless from any suit or reprisal whatsoever. All holders, public and private, of any such information are hereby authorized to release, without reservation or limitation, any and all such information they have concerning myself and in so doing, will be acting on my behalf at my request and will be held blameless and without any liability whatsoever. A copy, fax, or other reproduction of this Authorization shall be as effective as the original.

Name (please print)

Name (Please print)

X _____
Signature

X _____
Signature

Date

Date

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