



Application for Apartment
847.452.4498 p | 773.275.1844 f

Apartment Information:

Unit Applying For: _____ Monthly Rent: \$ _____
Unit No: _____

Applicant #1 Information:

Applicant Name: _____ Birth Date: _____
Social Security No.: _____ Driver's License No: _____

Current Address: _____ Current Monthly Rent: \$ _____
City / State / Zip: _____ How Long at Address: _____
Phone Number: _____ Current Landlord: _____
Landlord's Phone No.: _____

Previous Address: _____ Previous Landlord: _____
City / State / Zip: _____ How Long at Address: _____
Current Landlord: _____
Landlord's Phone No.: _____
Monthly Rent: \$ _____

Employer: _____ Position: _____
Employer's Address: _____ How Long: _____
Phone: No. _____ Annual Salary: \$ _____

Previous Employer: _____ Position: _____
Employer's Address: _____ How Long: _____
Phone: No. _____ Annual Salary: \$ _____

Applicant #2 Information:

Applicant Name: _____ Birth Date: _____
Social Security No.: _____ Driver's License No: _____

Current Address: _____ Current Monthly Rent: \$ _____
City / State / Zip: _____ How Long at Address: _____
Phone Number: _____ Current Landlord: _____
Monthly Rent: \$ _____ Landlord's Phone No.: _____

Previous Address: _____ Previous Landlord: _____
City / State / Zip: _____ How Long at Address: _____
Monthly Rent: \$ _____ Current Landlord: _____
Landlord's Phone No.: _____

Employer: _____ Position: _____
Employer's Address: _____ How Long: _____
Phone: No. _____ Annual Salary: \$ _____

Previous Employer: _____ Position: _____
Employer's Address: _____ How Long: _____
Phone: No. _____ Annual Salary: \$ _____

Applicant #3 Information:

Applicant Name: _____
Social Security No.: _____

Birth Date: _____
Driver's License No: _____

Current Address: _____
City / State / Zip: _____
Phone Number: _____
Monthly Rent: \$ _____

Current Monthly Rent: \$ _____
How Long at Address: _____
Current Landlord: _____
Landlord's Phone No.: _____

Previous Address: _____
City / State / Zip: _____
Monthly Rent: \$ _____

Previous Landlord: _____
How Long at Address: _____
Current Landlord: _____
Landlord's Phone No.: _____

Employer: _____
Employer's Address: _____
Phone: No. _____

Position: _____
How Long: _____
Annual Salary: \$ _____

Previous Employer: _____
Employer's Address: _____
Phone: No. _____

Position: _____
How Long: _____
Annual Salary: \$ _____

Additional Information:

How many will occupy the apartment: _____
Pets (include type and weight): _____
Children (Include ages): _____

I/we the undersigned understand that the deposit will be refunded only if the applicant is rejected by the management company/owner or if the apartment is unavailable. The deposit made shall be used as liquidated damages should I/we cancel, if the information given is false, or if I/we fail to pay outstanding balance due on the due date. I/we hereby authorize the management company/owner to run a credit check on me/us, as well as verify my/our employment and tenant histories. Credit fee is not refundable. The management company/owner does not discriminate based on race, color, religion, sex, handicap, familial status or national origin.

First month's rent plus \$60 for gas is due at lease signing. A deposit of one (1) month's rent is due two weeks prior to move in date.

Applicant Signature

Applicant Signature

Applicant Signature

Date:

Date:

Date: