

Rental Application for Apartment Occupants

Date when filled out: _____ Move-In Date: _____

Property Address: _____

Monthly Rental Rate: _____ Security Deposit: _____ Term of lease: 12 Months

Yes ___ No ___ Provide copy of picture ID and proof of income such as copy of check stub or bank statement.

Fees : Applicant submits a **non-refundable fee** of \$25.00 per applicant for processing, criminal background check, verify any rental and employment history, check credit report and reviewing this application.

Notice of Landlord's Right to Continue to Show the Property : Unless Landlord and Applicant enter into a separate written agreement otherwise, the Property remains on the market until a lease is signed by all parties and Landlord may continue to show the Property to other prospective tenants and accept another offer.

Primary Occupant Personal Information

Full name (exactly as on driver's license or govt. ID card) _____

Current address _____ City/State/Zip _____

Telephone (home) _____ (wk) _____ (cell) _____

E-mail _____ Former last name(s) _____

Driver's license# _____ State _____

Your Social Security #: _____

Birthday _____ Sex _____ Are you a U.S. citizen? _____ Yes _____ No

Marital Status _____ single _____ married _____ divorced _____ widowed _____ separated

Do you smoke? _____ Yes _____ No

Will you or any occupant have an animal? _____ Yes _____ No In door or Outdoor? _____

Kind, weight, breed, age _____

Name of apartment where you now live _____

Name of Current Landlord or Apt. Manager _____

Landlord's Phone (home) _____ (wk) _____ (cell) _____

Current Monthly Rent \$ _____ Move-In Date _____

Primary Occupant - Current Job History

Employer _____ Date you began this job _____

Address _____ City/State/Zip _____

Your Title or Position _____ Your gross monthly income is \$ _____

Describe other income Applicant wants considered _____

Supervisor's name and phone# _____

Secondary Occupant or Roommate's Personal Information

Full name (exactly as on driver's license or govt. ID card) _____

Current address _____ City/State/Zip _____

Telephone (home) _____ (wk) _____ (cell) _____

E-mail _____ Former last name(s) _____

Driver's license# _____ State _____
 Your Social Security #: _____
 Birthday _____ Sex _____ Are you a U.S. citizen? _____ Yes _____ No
 Marital Status _____ single _____ married _____ divorced _____ widowed _____ separated
 Do you smoke? _____ Yes _____ No
 Will you or any occupant have an animal? _____ Yes _____ No In door or Outdoor? _____
 Kind, weight, breed, age _____

Name of apartment where you now live _____
 Name of Current Landlord or Apt. Manager _____
 Landlord's Phone (home) _____ (wk) _____ (cell) _____
 Current Monthly Rent \$ _____ Move-In Date _____

Secondary Occupant - Current Job History

Employer _____ Date you began this job _____
 Address _____ City/State/Zip _____
 Your Title or Position _____ Your gross monthly income is \$ _____
 Describe other income Applicant wants considered _____
 Supervisor's name and phone# _____

Other Occupants (younger than 18 Year Old)

Names of all other persons to occupy the Property and their relationship to Primary or Secondary Applicant

Name _____ Relationship _____
 Birthday _____ Sex _____ Social Security# _____

Name _____ Relationship _____
 Birthday _____ Sex _____ Social Security# _____

Name _____ Relationship _____
 Birthday _____ Sex _____ Social Security# _____

List All Occupant Vehicles

List all vehicles to be parked on the property

Make and Color of vehicle _____
 Year _____ License# _____ State _____

Make and Color of vehicle _____
 Year _____ License# _____ State _____

Make and Color of vehicle _____
 Year _____ License# _____ State _____

Emergency Contact

Emergency contact person over 18, who will not be living with you:

Name _____ Relationship _____
 Address _____ City/State/Zip _____
 Telephone (home) _____ (wk) _____ (cell) _____

Occupant's Rental/Criminal History**Primary****Secondary**

Name: _____

	<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	<u>Explanation</u>
Do you change job in the last six months?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Will Applicant maintain renter's insurance? (Recommended)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Has Applicant ever:					
Been evicted?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Been asked to move out by a landlord?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Been sued for rent?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Breached a lease or rental agreement?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Filed for bankruptcy?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Lost property in a foreclosure?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Had <u>any</u> credit problems, slow-pays or delinquencies?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Been convicted of a crime?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is any occupant a registered sex offender?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Are there any criminal matters pending against any occupant?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Is there additional information Applicant wants considered?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

*Note: For more than 2 adult applicant (18 or older), please fill up another rental application form.***Authorization for Background Check**

I or we authorize AYONG LLC or represent member name _____ to (1) use the above information for background check including criminal background check, and (2) verify, by all available means, the above, including reports from consumer reporting agencies before, during and after tenancy on matters relating to my lease, and income history and other information reported by employer(s) to any state employment security agency (e.g., Texas Workforce Commission). Work history information any be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.

Primary Applicant's Signature

Date signed

_____ Date signed

Secondary Applicant's Signature

_____ Date signed

AYONG LLC or Member of AYONG LLC or Owner's Representative
