

To be completed by leasing Representative:

Property Address: \_\_\_\_\_ Unit # \_\_\_\_\_ Start Date \_\_\_\_\_

Base Rent: \$ \_\_\_\_\_ Deposit: \$ \_\_\_\_\_ Term of Lease: \_\_\_\_\_

Utilities Paid by Lessor: Gas \_\_\_\_\_ Electric: \_\_\_\_\_ Heat \_\_\_\_\_ Water \_\_\_\_\_ Hot Water \_\_\_\_\_ None \_\_\_\_\_

Application will be charged a \$20.00 application fee. No application will be processed until application fee has been paid.  
Application fee is not refundable

Fee Received on \_\_\_\_\_ by \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Present Address: \_\_\_\_\_ Length of Occupancy: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Rent: \_\_\_\_\_

Current Landlord: \_\_\_\_\_ Related: Yes \_\_\_ No \_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Related: Yes \_\_\_ No \_\_\_ Phone Number: \_\_\_\_\_

Dates of residency: \_\_\_\_\_

Have you or any person to reside in the apartment been evicted, asked to move out, or have a collection from a previous landlord?

Yes: \_\_\_ No: \_\_\_\_\_ If yes, explain: \_\_\_\_\_

Have you or any person to reside in the apartment been arrested, charged or convicted of any drug related activity or convicted of any

felony in the past five years? Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes, explain: \_\_\_\_\_

**All persons to reside in the apartment:**

\_\_\_\_\_

\_\_\_\_\_

Full legal name Relationship to applicant Social Security #

Employment: \_\_\_\_\_ Length: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Position or Title: \_\_\_\_\_

Income: Salaried per month: \$ \_\_\_\_\_ or wages/hour: \$ \_\_\_\_\_ Number of hours/week: \_\_\_\_\_

Make of Car: \_\_\_\_\_ License Plate #: \_\_\_\_\_ Car Payment: \_\_\_\_\_

**EMERGENCY CONTACT INFORMATION**(can not be a person on the lease)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone #: \_\_\_\_\_

**RELEASE OF INFORMATION:** I Hereby authorize REDBIRD PROPERTY MANAGEMENT, INC. or its agents to investigate my past history for the purpose of determining approval of this application for residing at the apartment indicated. This consent includes any history of residing, employment, credit, and any other references the Management deems necessary.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Received By \_\_\_\_\_