Rental Application

Return application to: 139 S Main St. Fillmore, IN 46128

If you are applying to rent as a couple/group, fill out a separate application per person and submit the applications together, so that we know you're not competing applicants.

| General Information | | | | | | | | | | | | | |
|--|----------------|----------------|------------------------------|--------------|--|---|---------------------------|---------------|-------------|---------|---------------------------|--|--|
| Last Nam | e | First Name Mid | | | ddle Initial | e Initial Previous Name | | | | lame(s) | (s) | | |
| | | | | | | | | | | | | | |
| Phone Number | | | | | Can Yo | ou Receive T | exts | Email Address | | | | | |
| | | | | ☐ Yes | | | | | | | | | |
| Driver | 's License S | tate and N | umber | | Social Security Number | | umber | Date of E | Birth mm/do | d/yyyy | Do you smoke/vape? | | |
| | | | | | | | | | | | Yes | | |
| What | property are | you looki | ing at renting? | | | When would you be ready to move in? | | | | | | | |
| | | | | | | | | | | | | | |
| Why are you look | ing at renting | this partic | rular property at this time? | | | How long do you expect to rent from us? | | | | | | | |
| | | | | | | | | | | | | | |
| | | List A | All Inter | | | <u>its Who</u> | | | iding He | ere | | | |
| I | Full Name | | | Date of | Birth | | Relatio | nship to App | olicant | | Does occupant smoke/vape? | | |
| | | | | | | | | | | | ☐ Yes | | |
| | | | | | | | | | | | ☐ Yes | | |
| | | | | | | | | | | | Yes | | |
| | | | | | | | | | | Yes | | | |
| | | | | | | | | | | | Yes | | |
| | Emergency Co | | | | ontact | | | | | | | | |
| Name: | | | Address, City, State ZIP: | | | ,c.i.e, | Phone#: | | | | Email: | | |
| | | | | | | | | | | | | | |
| | | | A | Addres | s Histo | ry - Cui | rent A | ddress | | | | | |
| Current Address | | | City | | | | State | | | | | | |
| | | | | | | | | | | | | | |
| Date occupancy started: Date occupancy ended/ending: | | | Reason for moving in: | | | : | Reason for moving out: | | | | | | |
| | | | | | | | | | | | | | |
| Own/Rent | | If re | nt, list nan | ne and phone | number of landlord or leasing company: | | | | | | | | |
| ○ Own ○ Rent | | | | | | | | | | | | | |
| If renting, did you provide notice? | | | Were you asked to leave? | | | re? | Is/was rent paid in full? | | | | | | |
| ○ Yes ○ No | | ○ Yes ○ No | | | ○ Yes ○ No | | | | | | | | |

| | | Address History – Pre | vious Address | | | | |
|-------------------------|--|---|---------------------------|--|--|--|--|
| Previous Address | | City | State | Zip | | | |
| | | | | | | | |
| Date occupancy started: | Date occupancy ended: | Reason for moving in: | Reason for moving out: | | | | |
| | | | | | | | |
| Own or Rent | | If rent, list name and phone number of landlord or leasing company: | | | | | |
| Own O Re | nt | | | | | | |
| If renting, did yo | u provide notice? | Were you asked to leave? | Is/was rent paid in full? | | | | |
| ○ Yes | O No | ○ Yes ○ No | ○ Yes ○ No | | | | |
| | | Address History – Pi | rior Address | | | | |
| Prior Address | | City | State | Zip | | | |
| | | | | | | | |
| Date occupancy started: | Date occupancy ended/ending: | Reason for moving in: | | Reason for moving out: | | | |
| | | | | | | | |
| Own/Rent | | If rent, list name and phone | e number of landlord o | r leasing company: | | | |
| Own O Re | nt | | | | | | |
| If renting, did yo | u provide notice? | Were you asked to leave? | Is/was rent paid in full? | | | | |
| ○ Yes | ○ No | ○ Yes ○ No | | ○ Yes ○ No | | | |
| | | General His | tory | | | | |
| | Have you ever been evicted from any rental property? If so, list the reason given for your eviction, and when it occurred. | | | | | | |
| | | | | | | | |
| | | Have you ever been late with a rent pays | ment? If so, please exp | lain. | | | |
| | | | | | | | |
| | Have you ha | d any reoccurring problems with your current | apartment or landlord | ? If so, please explain. | | | |
| | | | | | | | |
| If you were to ru | | Ity in the future and couldn't come up with the provide the person's name, address, & phone # | | nt, do you know someone that would loan you the em as a reference for you. | | | |
| | | | | | | | |
| | | Have you been a party to a lawsuit in the | past? If so, please exp | plain. | | | |
| | | | | | | | |
| We | may run a credit check | and a criminal background check. Is there an | ything negative we wil | I find that you want to comment on? | | | |
| | | | | | | | |
| | | How did you hear about th | is apartment? | | | | |
| | | | | | | | |

| Nearest Relative | | | | | | | | | | |
|----------------------|---|------------------|---|----------|---------------------------------|-----------------------|----------------------------------|----------------|--|--|
| Name | | Address | Phon | | | Email | Relationship | Years Known | | |
| | | | | | | | Kilowii | | | |
| | | | | | | | | | | |
| | | | | | ve can't locate you. Furthermon | | | | | |
| abandon the dwelling | for any reason then yo | u grant us permi | Ssion to allow y Personal | | | ove to remove all con | tents of the dwelling on your be | ehalf. | | |
| Name | Name Address | | | | ccs | Email | Relationship | Years | | |
| | | | | | | | | Known | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | Employ | ment Histo | ory - Pres | ent or M | er | | | | | |
| Name of Em | | | story - Present or Most Recent Employer b Title/Duties Supervisor | | | | | | | |
| | | | | | | | | | | |
| Phone # | Email Address | | Start Data | | | End Date | | | | |
| 1 Hone # | Linaii Addiess | | Start Date | | | Eliu Date | | | | |
| | | | | | | | | | | |
| Reason | n for starting job | | Reason for leaving if applicable | | | | | | | |
| | | | | | | | | | | |
| Mo | onthly gross pay | | Can you provide a copy of your last 2 paycheck stubs? | | | | | | | |
| 1410 | ntiny gross pay | | Yes O No | | | | | | | |
| | O ICS O INO | | | | | | | | | |
| |] | Employme | ient History – Previous Employer | | | | | | | |
| Name of Em | Job T | itle/Duties | | | Sı | pervisor | | | | |
| | | | | | | | | | | |
| Phone # | Email Address | Start Date | | | End Date | | | | | |
| | | Start Bate | | | | | | | | |
| | | | | | | | | | | |
| Reason | Reason for leaving if applicable | | | | | | | | | |
| | | | | | | | | | | |
| Mo | Can you provide a copy of your last 2 paycheck stubs? | | | | | | | | | |
| | ○ Yes ○ No | | | | | | | | | |
| | | | | | | | | | | |
| | ment History – Prior Employer | | | | | | | | | |
| Name of Em | Title/Duties Supervisor | | | | | | | | | |
| | | | | | | | | | | |
| Phone # | Email Address | | Start Date | ate | | | End Date | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Reason | Reason for leaving if applicable | | | | | | | | | |
| | | | | | | | | | | |
| Mo | Can you provide a copy of your last 2 paycheck stubs? | | | | | | | | | |
| | ○ Yes ○ No | | | | | | | | | |
| | | | | | | | | | | |

| Additional Verifiable Sources of Income You Would Like Considered |
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| |
| Bankruptcy |
| Have you ever declared bankruptcy? If so, please explain |
| |
| |
| Criminal History |
| Have you ever been convicted of any felony? If so, please explain. |
| |
| Are you a convicted sex offender? If so, please explain. |
| |
| |
| Certification |
| |
| I believe that the statements I have made are true and correct. I hereby authorize a credit and/or criminal check to be made, verification of information I provided and communication with any and all names listed on this application. |
| I understand that any discrepancy or lack of information may result in the rejection of this application. I further understand that false, fictitious, or misleading answers on this questionnaire may, at the sole discretion of the Lessor, result in immediate termination of any lease entered into at any point in the future between Lessor and Lessee. |
| I understand that there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope. |
| Furthermore, I grant permission to the Lessor to contact whomever Lessor sees fit to verify the accuracy of the information contained herein at any time. |
| Furthermore, I understand that this questionnaire does not represent any lease agreement in and of itself, and that neither Lessor or Lessee is obligated to enter into a lease agreement simply as a result of this application. |
| Furthermore, I hereby authorize the person or firm to whom this application is submitted to obtain such credit reports or other information as may be deemed necessary in connection with the establishment and maintenance of a credit account or for any other direct business requirement. |
| Furthermore, I understand that Lessor specifically requests no information be filled in which I am not legally required to disclose, including, but not limited to, information protected under court order, witness protection program, any military or government intelligence agency, Americans with Disability Act, Fair Housing Act, or any other means. Any such information which I have elected to disclose herein was done so of my free will, and not at the request of Lessor. |
| Lessee Name (Printed) |
| Lessee Signature Date Signed |
| |