



\$10 Application Fee

APPLICATION OF RESIDENCY

Discrimination: It is against the law to discriminate against tenants on the basis of race, religion, national origin, age or neighborhood racial makeup.

Application Date _____ Desired date of occupancy _____
Prospective Property Address _____ Apt. # _____
Housing needs _____

Applicant Name _____
Date of Birth _____ Social Security Number _____

Co-Tenant/Spouse Name _____
Date of Birth _____ Social Security Number _____

Other Persons Who Will Occupy the Apartment:

Name _____	Relationship _____
Name _____	Relationship _____
Name _____	Relationship _____

Applicant's Current Address _____
Length of Residency _____ Home/Cell Phone _____
Landlord's Name _____ Phone _____

Previous Landlord _____ Phone _____
Have you ever been evicted or had a forcible detainer filed against you? Yes _____ No _____
Reason _____
Are you a convicted sex offender? Yes _____ No _____

Co-Tenant/Spouse's Current Address _____
Length of Residency _____ Home/Cell Phone _____
Landlord's Name _____ Phone _____

Previous Landlord _____ Phone _____
Have you ever been evicted or had a forcible detainer filed against you? Yes _____ No _____
Reason _____
Are you a convicted sex offender? Yes _____ No _____

Applicant's Employer _____
Address _____ City _____ State _____
Date Started _____ Net Monthly Income _____
Position _____ Supervisor _____

Additional Income: Source: _____ Amount: _____

Co-Tenant/Spouse's Employer _____
Address _____ City _____ State _____
Date Started _____ Net Monthly Income _____
Position _____ Supervisor _____

Additional Income: Source: _____ Amount: _____

Name of Bank	Branch or Address	Type of Account	Account Numbers

List two personal references that have known you for at least 5 years:

Name: _____	Name: _____
Address: _____	Address: _____
City: _____	City: _____
Phone: _____	Phone: _____
Relationship: _____	Relationship: _____

Motor Vehicles you own, are buying and/or will be parking on the property including motorcycles, boats, and other Recreational Vehicles:

Make/Model	Yr.	Color	State	License #	Exp. Date

I/We confirm that all the information supplied is true and correct. I/We understand that I/we can be turned down for the apartment if I/we have falsified any information on this application. I/we hereby authorize the verification of all above information by ATS, Inc. including my credit, housing, court filings, rental, check writing, employment history including salary, and criminal background.

Applicant's Signature _____ Date _____
Co-Tenant/Spouse's Signature _____ Date _____

OFFICE USE ONLY Application Accepted _____ Rejected _____
Manager's Signature _____ Date _____
Notes: