

# APPLICATION TO RENT

**Each individual occupant who is responsible for rent payment MUST complete a separate application form**

Address of property desired:	Desired move-in date:
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## PERSONAL INFORMATION

First name		Middle name		Last name		Social security number	
Date of birth	Driver's license no. / State		Email address			Phone number (    ) <input type="checkbox"/> Textable	
1. Current address				City		State	Zip code
Length of time	Reason for moving		Monthly payment	Landlord name		Landlord phone (    )	
2. Previous address				City		State	Zip code
Length of time	Reason for moving		Monthly payment	Landlord name		Landlord phone (    )	
Do you smoke?	Do you have pets? If yes, please describe			Please list any skills you may have (ex. drywall, masonry, flooring, etc.)			

## OTHER TENANT(S)

Name	Age	Relationship	Occupation

## EMPLOYMENT INFORMATION

Primary employment		Employer name	
Length of employment	Phone number (    )	Employer address	
Name of your supervisor			
Additional employment		Employer name	
Length of employment	Phone Number (    )	Employer address	
Name of your supervisor			

## FINANCIAL INFORMATION

Total gross income \$		Per <input type="checkbox"/> Year <input type="checkbox"/> Week <input type="checkbox"/> Month	Source(s) of income: <input type="checkbox"/> Wages <input type="checkbox"/> Salary <input type="checkbox"/> Tips <input type="checkbox"/> Child support <input type="checkbox"/> Commission <input type="checkbox"/> Other _____ <input type="checkbox"/> Govt. assistance <input type="checkbox"/> Student loan
Bank name		Checking / Savings <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Estimated balance
		<input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Credit card		Credit limit	Estimated balance

PLEASE LIST ALL OF YOUR CURRENT MONTHLY EXPENSES (INCLUDING MEDICAL, STUDENT LOANS, CELL PHONES, ETC.)

Expense	Monthly payment	Expense	Monthly payment

### EMERGENCY / PERSONAL REFERENCE INFORMATION

In case of emergency, notify:	Address	Phone	Relationship
1.			
2.			

Mother's maiden name:

Personal references (these are very important)	Address	Phone	Years known
1.			
2.			
3.			

### VEHICLE INFORMATION (PLEASE LIST ALL MOTOR VEHICLES THAT WILL BE ON THE PREMISES)

Vehicle make and model	Year	License number

Have you ever filed for bankruptcy? If yes, date bankruptcy filed and describe:

Have you ever been evicted or asked to move? If yes, please describe:

Have you ever been arrested/convicted of a crime? If yes, please describe:

Do you own any real estate? If yes, where and what:

Have you ever willfully and intentionally refused to pay rent when due?

Do you know of anything which may interrupt income or ability to pay rent?

### APPLICANT AUTHORIZATION

Applicant represents that all the above statements are true and correct and hereby authorizes landlord/agent to verify the above items including, but not limited to: obtaining a credit report, verification of finances, employment, and rental history. Applicant agrees to furnish additional character or credit references upon request. Applicant also authorizes landlord/agent to obtain updated information annually or on future occasions for rental renewal or collection purposes. Applicant acknowledges this application will become part of the lease agreement when approved.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of applicant

#### Applications are not complete until we've received ALL of the following:

- Completed application with date and signature
- Proof of ALL income (pay stubs, W-2's, etc.) - email preferred
- Completed pet application if you have pets (lower right hand of our website)
- Payment of \$30.00 application fee

### SEND COMPLETED APPLICATION TO:

Email: [ben.gerber@gerberholdings.com](mailto:ben.gerber@gerberholdings.com)

Fax: (801) 516-1356

Mail: P.O. BOX 474, DALTON, OH 44618

Phone: (330) 516-1353