

RENTAL APPLICATION

Every occupant over the age of 18 MUST fill out a separate application (even if married).
Send a copy to _____ or text picture to: _____

Property Address (applying for)

Applicant Information

First Name	Middle	Last	SSN
Date of Birth	Like to Move on	Driver License	State
Mobile	Phone2	Email	
Current Home address		City / State / Zip	
Residing since	Landlord	Landlord Contact	
Reason for leaving		Current Rent	Amount unpaid

Additional Occupant(s)

Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age
Name	Relationship	Occupation	Age

Vehicle Information

Make / Model	State / Tag	Year	Color
Make / Model	State / Tag	Year	Color
Make / Model	State / Tag	Year	Color

Employment

Current Employer	Occupation	Salary
Address		City / State / Zip
Manager	Phone	Employed Since
Previous Employer	Occupation	Salary
Address		City / State / Zip
Manager	Phone	Employment period

Current Income

Income	<input type="checkbox"/> Weekly <input type="checkbox"/> BiWeekly <input type="checkbox"/> Monthly	Source	Proof of Income	<input type="checkbox"/> Yes <input type="checkbox"/> No
Income	<input type="checkbox"/> Weekly <input type="checkbox"/> BiWeekly <input type="checkbox"/> Monthly	Source	Proof of Income	<input type="checkbox"/> Yes <input type="checkbox"/> No
Income	<input type="checkbox"/> Weekly <input type="checkbox"/> BiWeekly <input type="checkbox"/> Monthly	Source	Proof of Income	<input type="checkbox"/> Yes <input type="checkbox"/> No

Financial Information

Bank	Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan/Credit	Balance	Monthly Payment
Bank	Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan/Credit	Balance	Monthly Payment
Bank	Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan/Credit	Balance	Monthly Payment
Bank	Account Type	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Loan/Credit	Balance	Monthly Payment

Reference Contact

Name	Phone	Email / Phone	Relationship
Name	Phone	Email / Phone	Relationship

Questions / Authorization

Has applicant ever been sued for bills ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever been evicted ? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever been bankrupt ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever been brought to court by any landlord? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever been guilty of felony ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever damaged an apartment ? <input type="checkbox"/> Yes <input type="checkbox"/> No
Has applicant ever broken a lease ? <input type="checkbox"/> Yes <input type="checkbox"/> No	Has applicant ever moved owing rent ? <input type="checkbox"/> Yes <input type="checkbox"/> No
Is the total move-in amount available now (rent , security deposit) ? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant.

All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

Applicant Signature

Date

Please attach copy of ID & SSN while submitting the application

Email application

SMS / Text image

Mail application

In-Person

For office user only

Approved <input type="checkbox"/> Yes <input type="checkbox"/> No	Property Address
Notes	

Background and Credit Check Authorization Consent form

Every occupant over the age of 18 MUST need to run background check.
 So to sign and submit for running background and credit check
 Send a copy to techttenantgroup@gmail.com

Name			
Address			
Phone Number	Email address	Date of Birth	
SSN. NO	Driving lic No.	Other Name/Aliases	

I hereby authorize (Name) and his/her its agents and representative to conduct a review of my background and to obtain a consumer credit report/or an investigative consumer credit report for any other credit report and any other information necessary for the purposes of tenant screening.

I understand and agree that the information obtained may include, but is not limited to, credit and criminal history, past and present employment and income, bank accounts, credit accounts, credit reports, rental/residence history, references, vehicle records, driving records, criminal records, civil judgment records and any other relevant information. I further authorize previous or current employers, landlords, financial institutions, banks or other companies, public agencies or individuals to release any information, records or data they may have pertaining to me.

The information received will be used only for the purposes stated herein and will be maintained in a confidential manner.

Pursuant to the Fair Credit Reporting Act (FCRA), if any adverse action is taken based upon information in the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

A copy, electronic copy, image, or facsimile of this authorization is as valid as the original.

Signature / Name :

Date: