

Property Name : \_\_\_\_\_ Unit # : \_\_\_\_\_

Applicant Name : \_\_\_\_\_ Date of Birth : \_\_\_\_\_ SSN : \_\_\_\_\_

Current Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_ Phone : \_\_\_\_\_

Monthly Payment or Rent : \_\_\_\_\_ How Long? : \_\_\_\_\_

Previous Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_

Monthly Payment or Rent : \_\_\_\_\_ How Long? : \_\_\_\_\_

### EMPLOYMENT INFORMATION *(students must provide student loan information)*

Current Employer : \_\_\_\_\_

Employer Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_

Phone : \_\_\_\_\_ E-mail : \_\_\_\_\_ Fax : \_\_\_\_\_

Position : \_\_\_\_\_ Annual Income : \_\_\_\_\_ How Long? : \_\_\_\_\_

### EMERGENCY CONTACT

Name : \_\_\_\_\_ Address : \_\_\_\_\_

City : \_\_\_\_\_ State : \_\_\_\_\_ Zip Code : \_\_\_\_\_

Phone : \_\_\_\_\_ Relationship : \_\_\_\_\_

### CO-SIGNER INFORMATION, if applicable

Name : \_\_\_\_\_ Date of Birth : \_\_\_\_\_ SSN : \_\_\_\_\_

Current Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_ Phone : \_\_\_\_\_

Monthly Payment or Rent : \_\_\_\_\_ How Long? : \_\_\_\_\_

Previous Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_

### CO-APPLICANT EMPLOYMENT INFORMATION

Current Employer : \_\_\_\_\_

Employer Address : \_\_\_\_\_ City : \_\_\_\_\_

State : \_\_\_\_\_ Zip Code : \_\_\_\_\_

Phone : \_\_\_\_\_ E-mail : \_\_\_\_\_ Fax : \_\_\_\_\_

Position : \_\_\_\_\_ Annual Income : \_\_\_\_\_ How Long? : \_\_\_\_\_

### REFERENCES

Name : \_\_\_\_\_ Address : \_\_\_\_\_ Phone : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.

Signature of Applicant : \_\_\_\_\_ Date : \_\_\_\_\_

Signature of Co-Applicant : \_\_\_\_\_ Date : \_\_\_\_\_

**Initial deposit non-refundable if you decide not to move in**