## =8 FYbH/`Application

Any applicant over 18 years old, who doesn't share credit history, must apply separately.

## PLEASE TELL US ABOUT YOURSELF (2 years residence info needed)

			<del>-</del> <del></del>	<del>-</del>	
ame of Applicant			Date of birth	Social Security #	Driver's License#
ame of Spouse			Date of birth	Social Security #	Driver's License#
plicant's Present Address			City	State ZIP	Cell/Telephone #
esent Landlord			Telephone #	Monthly Payment	How Long?
ason For Leaving					
olicant's Previous Address			City	State ZIP	Telephone #
evious Landlord			Telephone #	Monthly Payment	How Long?
ason For Leaving					
ve you ever been ev	icted? YE	S NO			
ve you ever broken	a rental contra	act? YES NO			
-					
ve you ever been co	nvicted of a F	elony? YES NO	O If YES, explain	below	
ke of Vehicle	Year	License #	State Other	vehicles (Truck, RV, Motorcycle)	
ke of Vehicle	Year	License #	State Other	vehicles (Truck, RV, Motorcycle)	
ts (Keeping of Pets	requires a dep	posit and owner's cons	ent)		
	Cav	- Drood	Color	Woight	Acc.
me:	Sex	Breed	Color	Weight	Age
me:	Sex	Breed	Color	Weight	Age
EASETELL	IS VBUIL	T VOLID IOR (2)			
LLAUL ILLL			(Pare required)		
		. 100K00B (2)	<u>/ears required)</u>		
nlicant's Current Employer				Sunanisar	Talanhan
oplicant's Current Employer			vears required) Occupation	Supervisor	Telephon
plicant's Current Employer		City			Telephon How Long
dress			Occupation		
			Occupation	ZIP Monthly Income  Supervisor	How Lon
olicant's Former Employer		City	Occupation State	ZIP Monthly Income  Supervisor	How Long
dress plicant's Former Employer		City	Occupation  State  Occupation  State	ZIP Monthly Income  Supervisor  ZIP Monthly Income  Supervisor	How Long How Long

email: \_\_\_\_\_

Spouse's Former Employer	Оссі	upation	Supervisor	How Long?
Address	City	State ZIP	Monthly Income	How Long?
Other Sources of Income  PLEASE TELL US ABO	UT YOUR BANK REF	Amount ERFNCES		When Received
Bank Name	Address	Checking	Savings	Account Number
Bank Name	Address	Checking	Savings	Account Number
Other Occupants - Res	idents Under 18			
Name	Date of Birth	Name		Date of Birth
Name	Date of Birth	Name		Date of Birth
In Case of Emergency, Notify:Name		Phone	Number	
Address	City		State ZIP	Relationship
but not limited to do on request, and w must be paid within	nts that statements above made a credit checks, unlawful detainer chaives any claim against any persoin 24 hours of approval and is NOI later than 2 weeks after the applic	ecks and telecredit checks a n(s) providing such verificati N REFUNDABLE if the applic	nd agrees to furron. Applicants ur cant does not cho	nish additional credit references inderstand the Security Deposit
Spouse's Signature:		Dated: _		
Address applying for:			Property # _	
Approved:	Date:			
Please tell us how you	heard about this renta	_ al		

Sign in yard

**RPM** website

Other website

## Rental Verification (Fo not complete: sign authorization below only)

Applicants Name	Date						
Landlords NAME	ME telephone #						
Address rented							
Move in Date:							
Move Out Date:							
Lease Fulfilled?	30- day notice given ☐ yes ☐ no						
Eviction started?  yes no	unit left clean when vacated?						
Monthly Rent Payment	Did they pay timely?  yes no						
Number of NSF checks:	Number of times Late						
Would you rent to them again?   yes	□ no						
Did they have pets?	If yes, what type?						
Would you give the pet a good reference	e?  yes no Damage by pet?  yes no						
If yes, please explain							
Comments:							
Authorization:							
I authorize RPM to verify the above information additional information upon request.	n including, but not limited to, the obtaining of a credit report and agree to furnis						
Signature of Applicant							

## Employment Verification (do not complete: <u>sign authorizations below only</u>)

Applicants Name	
Please verify past two years employment	Date
Employers NAME	telephone #
Name of person you spoke with:	Position:
How long have they been employed:	thru
Hourly Rate Monthly V	Wage
Comments:	
Hourly Ratex 40 hours x 52 weeks =  Rentx 2 =	e: Verified monthly income must be 2 x's the amount of the monthly rent formation including, but not limited to, the obtaining of a credit
Signature of applicant	
Applicant's Name	Please verify past two years employment
Employers NAME	telephone #
Name of person you spoke with:	Position:
How long have they been employed:	thru
Hourly Rate Monthly V	Wage
Comments:	
Hourly Ratex 40 hours x 52 weeks =	
Rent x 2 =	_
	hly income must be 2 x's the amount of the monthly rent formation including, but not limited to, the obtaining of a credit request.
Signature of 2 <sup>nd</sup> Applicant (SPOUSE)	Date