

RENTAL APPLICATION

ACCT# _____

PLEASE NOTE: Individual applications required from each occupant 18 years of age or older.
(All sections must be complete)

NAME _____ SOC SEC# _____
First Middle Last Jr, Sr, I, II, III

PHONE _____ DR LIC _____
Home Work Number State Expiration

Birth name if different from above _____ DATE OF BIRTH ____/____/____

PROPOSED OCCUPANTS

NAME	AGE	RELATIONSHIP

PLEASE LIST 3 TO 5 YEARS OF CURRENT AND PAST ADDRESSES. INCLUDING ZIP CODES.

#1 CURRENT ADDRESS _____
Number Street Apt No City State Zip

OWNER/MGR _____
Full Name Number Street Apt No City State

MORTGAGE CO. _____
Name Address Loan Number

HOW LONG _____ AMT RENT PAID _____ OWNER/MGR. OR MORTGAGE CO. PHONE _____
Months/Years

WHY ARE YOU LEAVING? _____

#2 PREVIOUS ADDRESS _____
Number Street Apt No City State Zip

OWNER/MGR _____
Full Name Number Street Apt No City State

MORTGAGE CO. _____
Name Address Loan Number

HOW LONG _____ AMT RENT PAID _____ OWNER/MGR. OR MORTGAGE CO. PHONE _____
Months/Years

WHY DID YOU LEAVE? _____

#3 PREVIOUS ADDRESS _____
Number Street Apt No City State Zip

OWNER/MGR _____
Full Name Number Street Apt No City State

MORTGAGE CO. _____
Name Address Loan Number

HOW LONG _____ AMT RENT PAID _____ OWNER/MGR. OR MORTGAGE CO. PHONE _____
Months/Years

WHY DID YOU LEAVE? _____

EMPLOYMENT INFORMATION

EMPLOYER					
_____		ADDRESS _____			
Company Name		Street	City	State	
GROSS MO SALARY _____	MIL GRADE _____	POSITION _____	HOW LONG _____		
			Months/Years		
SUPERVISOR/MGR _____					
_____		_____			
Full Name		Position	Telephone		
PREVIOUS EMPLOYER					
_____		ADDRESS _____			
Company Name		Street	City	State	
GROSS MO SALARY _____	MIL GRADE _____	POSITION _____	HOW LONG _____		
			Months/Years		
SUPERVISOR/MGR _____					
_____		_____			
Full Name		Position	Telephone		

BANK (CHECKING) _____

Bank Name	Branch	City	Acct. No.	How Long
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BANK (SAVING) _____

Bank Name	Branch	City	Acct. No.	How Long
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BANK (CREDIT UNION) _____

Bank Name	Branch	City	Acct. No.	How Long
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PETS _____

Number of	Description
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WILL YOU HAVE ANY WATERBEDS? _____

REFERENCES

FAMILY _____				
_____		_____		
Full Name		Number	Street	
_____		_____		
City	State	Relationship	Phone	
LOCAL _____				
_____		_____		
Full Name		Number	Street	
_____		_____		
City	State	Relationship	Phone	
EMERGENCY _____				
_____		_____		
Full Name		Relationship	Phone	

HAVE YOU BEEN DELINQUENT IN PAYMENT OF YOUR RENT OR ANY OTHER FINANCIAL OBLIGATION?

IF YES, PLEASE EXPLAIN _____

HAVE YOU EVER BEEN A DEFENDANT IN AN UNLAWFUL DETAINER (EVICTION) LAWSUIT? IF YES, PLEASE EXPLAIN _____

I hereby authorize **DELTA PROPERTY MANAGEMENT** or its agents to verify the above information by checking with any and all available sources. I understand the \$ _____ fee for verifying this rental application is not a deposit and will not be applied to future rent, or refunded even if my application to rent is declined.

APPLICANT'S SIGNATURE _____ DATE _____

(Unless other arrangements have been made, please fill in your credit card information below.

We accept Visa, Mastercard and American Express.

Please call us at (866) 878-9902 if you have any questions.

Card # _____ - _____ - _____ - _____ Security Code _____

Exp. Date _____ / _____

Name on Card _____ Card Holder's Signature _____

I Would Like To Move In On _____

Length Of Stay _____

1 Br Unit _____ 2 Br Unit _____

I Need A Corporate Unit (Bed, Linen, Dishes, Etc.) _____
Yes / No