



RENTAL APPLICATION (Exhibit "A")

APPROVED FOR USE BY MEMBERS OF THE STARK COUNTY ASSOCIATION OF REALTORS®



PERSONAL INFORMATION (Each co-resident must submit a separate application)

FULL NAME _____ Phone _____
 Social Security # _____ Birth Date _____ Driver's License # _____ State _____

SPOUSE'S FULL MAIDEN NAME

Social Security # _____ Birth Date _____ Driver's License # _____ State _____

List the full names of all persons to be occupying the premises.

Name _____ Name _____ Name _____
 Name _____ Name _____ Name _____

RESIDENCE HISTORY

PRESENT STREET ADDRESS _____ How Long _____
 City _____ State _____ Zip Code _____
 Present Telephone Number (____) _____ Amount of Rent \$ _____
 Present Landlord or Mortgage Holder _____ Phone No. (____) _____
 Address of Landlord _____ City _____ State _____ Zip _____
 Reason for Moving _____

PREVIOUS STREET ADDRESS _____ How Long _____
 City _____ State _____ Zip Code _____
 Amount of Rent \$ _____ Reason for Moving _____
 Previous Landlord or Mortgage Holder _____ Phone No. (____) _____
 Address of Landlord _____ City _____ State _____ Zip _____

Do any of the following apply to you, your spouse, or any other occupants:

Been formally evicted?	Yes _____ No _____
Smoke?	Yes _____ No _____
Have any pets?	Yes _____ No _____
Been convicted of a crime?	Yes _____ No _____
Written a bad check?	Yes _____ No _____
Declared bankruptcy?	Yes _____ No _____
Ever broken a rental agreement or lease contract?	Yes _____ No _____
Been served a notice to vacate?	Yes _____ No _____
Ever been sued for non-payment of rent or damages to rental property? Yes _____ No _____	
A member of any branch of the US Military?	Yes _____ No _____

If yes, give details:

EMPLOYMENT INFORMATION

PRESENT EMPLOYER _____ Employer Phone # (____) _____
 Employer Full Address _____
 How Long? _____ Position _____ Supervisor's Name _____ Monthly Net Income _____

PREVIOUS EMPLOYER _____ Employer Phone # (____) _____
 Employer Full Address _____
 How Long? _____ Position _____ Supervisor's Name _____ Monthly Net Income _____

SPOUSE'S

PRESENT EMPLOYER _____ Employer Phone # (____) _____
 Employer Full Address _____
 How Long? _____ Position _____ Supervisor's Name _____ Monthly Net Income _____

Other Income and Source _____

EMERGENCY NOTIFICATION

Name _____ Relationship _____ Phone # _____
 Address _____ City _____ State _____ Zip _____

VEHICLES

Make _____ Year _____ Color _____ License # _____ State _____
Make _____ Year _____ Color _____ License # _____ State _____
Make _____ Year _____ Color _____ License # _____ State _____

BANKING AND CREDIT REFERENCES

BANK _____ Branch _____
Checking Account # _____ Savings Account # _____

CREDIT REFERENCE _____
Account # _____ Phone _____ Balance Due _____ Monthly Payments _____

CREDIT REFERENCE _____
Account # _____ Phone _____ Balance Due _____ Monthly Payments _____

CREDIT REFERENCE _____
Account # _____ Phone _____ Balance Due _____ Monthly Payments _____

ADDITIONAL COMMENTS:

PROPERTY ADDRESS FOR APPLICATION

1ST CHOICE: _____
2ND CHOICE: _____
Anticipated date of occupancy? _____

How were you referred to us? Newspaper _____, Yard Sign _____, Just Stopped By _____, Friend's Name _____

It Is Illegal To Discriminate Against Any Person Because Of Race, Color, Religion, Sex, Ancestry, Handicap, Familial Status, Or National Origin.

I do hereby affirm that, to the best of my knowledge, all the information contained in this application is true and correct. I understand that if chosen, any information on this application found to be incorrect will be grounds for eviction. I also understand that this is only an application and does not reserve or guarantee a residence as such. If this application is approved and accepted I agree to pay the balance of the security deposit within _____ business days after being notified of an approval or this application becomes null and void. By signing this application, you are authorizing the use of any credit reporting/screening agencies to verify credit and validate all information you provided. Further, your signature authorizes the management and the credit report/screening agencies to later exchange credit information and in the event of any default of the lease agreement to obtain your credit report for collection or skip tracing purposes.

Facsimile (Fax) Signatures Constitute A Valid Signing Of This Application

Applicant #1 _____ Date _____

Applicant #2 _____ Date _____

Please mail or fax your application to: _____

REFERENCE VERIFICATION

____ Present Landlord Remarks _____ By _____
____ Previous Landlord Remarks _____ By _____
____ Employer Remarks _____ By _____
____ Co-Resident Employer Remarks _____ By _____

This application: Approved Not Approved
Reason: _____
By: _____ Date: _____

Applicant Notified By: _____
Date: _____