



Office use only

Apt. # _____ Rent \$ _____ Lease Term 1 year

Move in Date _____ Deposit Amount \$ _____

Pro Rated Rent \$ _____ PRR Dates _____

Rental Application: Date Received _____ Leasing Agent _____

Applicant's Last Name _____ First Name _____ M.I. _____

Contact Phone No. (Home) _____ (Cell) _____ (Other) _____

Date of Birth ____ - ____ - ____ Social Security No. ____ - ____ - ____ Drivers License No. _____

Spouse's Last Name _____ First Name _____ M.I. _____

Contact Phone No. (Home) _____ (Cell) _____ (Other) _____

Date of Birth ____ - ____ - ____ Social Security No. ____ - ____ - ____ Drivers License No. _____

Pets: Pets are allowed, but only 1 per household. You must meet Managements guidelines in order to keep a pet at the Legacy Village. Please ask Management for a list of the guidelines.

Do you have a pet? Yes _____ No _____ How Many? _____ Weight _____

Pet Description

Other Occupants Living With You

Name _____ Date of Birth ____ - ____ - ____ S.S.# ____ - ____ - ____

Name _____ Date of Birth ____ - ____ - ____ S.S.# ____ - ____ - ____

Name _____ Date of Birth ____ - ____ - ____ S.S.# ____ - ____ - ____

Name _____ Date of Birth ____ - ____ - ____ S.S.# ____ - ____ - ____

Personal / Rental / Mortgage History

1) Present Home Address _____
Street City State Zip Code

Dates: From – To _____ Monthly pmt. \$ _____

Do You Rent? _____ Do You Own? _____ Reason For Moving _____

Landlord or Mortgage Holder _____ Phone No. _____

2) Previous Home Address _____
Street City State Zip Code

Dates: From – To _____ Monthly pmt. \$ _____

Do You Rent? _____ Do You Own? _____ Reason For Moving _____

Landlord or Mortgage Holder _____ Phone No. _____

3) Have you ever been evicted from any lease premises? Yes _____ No _____

Employment Information

1) Applicant Employed by _____ Position _____ Salary \$ _____

Business Address _____ Business Phone # _____
Street City State Zip

Supervisor _____ Employed From – To _____

2) Previously Employed by _____ Position _____ Salary \$ _____

Business Address _____ Business Phone # _____
Street City State Zip

Supervisor _____ Employed From – To _____

3) Spouse Employed by _____ Position _____ Salary \$ _____

Business Address _____ Business Phone # _____
Street City State Zip

Supervisor _____ Employed From – To _____

4) Additional Income: (Child Support, Alimony, Ect.) Amount \$ _____ Per _____

Credit and Loan References

Loans and Charge accounts; (Bank Loans, Car pmts, Credit Cards, Cell Phones)

1) Owed to _____ Account No. _____ Type of Loan _____

Address _____ Total Debt \$ _____
Street City State Zip

Amount of your Payment \$ _____ Per _____

2) Owed to _____ Account No. _____ Type of Loan _____

Address _____ Total Debt \$ _____
Street City State Zip

Amount of your Payment \$ _____ Per _____

3) Owed to _____ Account No. _____ Type of Loan _____

Address _____ Total Debt \$ _____
Street City State Zip

Amount of your Payment \$ _____ Per _____

4) Owed to _____ Account No. _____ Type of Loan _____

Address _____ Total Debt \$ _____
Street City State Zip

Amount of your Payment \$ _____ Per _____

Bank References

1) Name of Bank _____ Account No. _____

Address _____ Type of Account _____
Street City State Zip

2) Name of Bank _____ Account No. _____

Address _____ Type of Account _____
Street City State Zip

3) Name of Bank _____ Account No. _____

Address _____ Type of Account _____
Street City State Zip

Emergency Notification

Name _____ Relationship _____

Address _____
Street City State Zip Code

Phone No. (Home) _____ (Cell) _____ (Work) _____

Vehicle Information

Auto No. 1 – Make/Model _____ Color _____

Auto Tag No. _____ State _____

Auto No. 2 – Make/Model _____ Color _____

Auto Tag No. _____ State _____

Auto No. 3 – Make/Model _____ Color _____

Auto Tag No. _____ State _____

Note: There are no storage areas for recreational vehicles (Boats, Trailers, Jet skis, Ect.). You must make other arrangements for the storage of such items.

1) Have you ever been convicted of a felony? Yes _____ No _____

If yes where was jail time served? _____

2) Have you ever been convicted of the sale, distribution, or possession of illegal drugs?

Yes _____ No _____

Applicant hereby authorizes verification of any information set forth on this application, including release of information by any bank, savings and loan, lender, employer (present or former), and law enforcement. All such information herein and released as authorized above, will be kept confidential. Applicant represents that the information set forth on this application is true and complete. Material misrepresentations on this application will constitute default under the lease or Rental Agreement between the parties. Credit check charge. Applicant has submitted the sum of \$ 15.00 per person for each applicant over the age of (18) eighteen. This fee is non-refundable. This fee will be retained by Management to cover the cost of processing application furnished by applicant. This application must be signed before Management can process it. Good faith deposits. Applicant agrees to deposit \$ 150.00 with Management as a good faith deposit at the time his/her application is accepted approved and Management informs applicant of future rental. Applicant understands this deposit will be applied toward payment of full Security Deposit in the amount of \$450.00. The balance of \$300.00 for said Security Deposit to be paid in full at the time applicant takes possession of rental unit. Applicant understands he/she may cancel slated move in of unit by written notice within (72) seventy-two hours and receive a full refund of his/her good faith deposit within (30) thirty days of cancellation. Should applicant cancel once into the (72) seventy-two hour period before move in or refuse to occupy the premises on the agreed date, applicant understands that his/her good faith deposit will be held by Management for rent loss due to cancellation.

Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____

Co-Applicant's Signature _____ Date _____