

Rental Application

LOVES PARK, ILLINOIS
MODEL OFFICE
TEL: (815) 633-7004
FAX: (262) 202-5178

FOR OFFICE USE ONLY	
DATE	_____
PROPERTY	_____
APT. NO.	RENT \$ _____
AGENT	_____

Please complete all requested information on the front and back of this form. Thank you for your interest in our apartments.

Date of Application _____	Desired Date of Occupancy _____
Type and Size of Apartment Wanted (No. of Bedrooms, etc.) _____	

PERSONAL INFORMATION

APPLICANT'S FULL NAME _____ Date of Birth _____

Social Security No. _____ Driver's License No./State _____

CO-APPLICANT'S FULL NAME _____ Date of Birth _____

Social Security No. _____ Driver's License No./State _____ Relationship _____

Full Names of All Other Residents:	Relationship to You	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

RESIDENCE HISTORY

PRESENT ADDRESS _____

Present Telephone _____ Dates From: _____ To: _____

Present Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____

Dates From: _____ To: _____

Previous Landlord or Mortgage Co. _____ Telephone _____

Monthly Payment \$ _____ Reason for Moving _____

EMPLOYMENT INFORMATION

PRESENT EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary \$ _____

PREVIOUS EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____

CO-APPLICANT'S EMPLOYER _____ Dates From: _____ To: _____

Employer's Address _____ Telephone _____

Position _____ Supervisor _____ Gross Monthly Salary \$ _____

BANKING AND CREDIT REFERENCES

BANK NAME & BRANCH _____ Telephone _____
Checking Acct. No. _____ Savings Acct. No. _____
Loan Acct. No. _____ Monthly Payment \$ _____

OTHER INFORMATION

TOTAL NUMBER OF VEHICLES (including Company Vehicles) _____

Make/Model _____ Year _____ Color _____ Tag No./State _____

Make/Model _____ Year _____ Color _____ Tag No./State _____

Other Car, Motorcycle, etc. _____

Total Gross Monthly Household Income \$ _____

If there are other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we could contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Per _____ Source _____ Telephone _____

Amount \$ _____ Per _____ Source _____ Telephone _____

Comments: _____

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes No
Been evicted or asked to move out? Yes No Broken a Rental Agreement or Lease? Yes No
Been sued for damage to rental property? Yes No Declared Bankruptcy? Yes No

In Case of Personal Emergency, Notify: _____ Relationship _____
Address _____ Home Phone _____ Work Phone _____

I hereby make application for an apartment and certify that this information is correct. I authorize you to contact any references that I have listed. I also authorize you to obtain my consumer credit report from your credit reporting agency, which will appear as an inquiry on my file.

APPLICANT'S SIGNATURE _____
CO-APPLICANT _____
DATE SIGNED _____