

APPLICATION TO RENT

Each Individual Occupant Who Is Responsible For Rent Payment
MUST Complete A Separate Application Form



PERSONAL INFORMATION

LAST NAME		FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER	
DATE OF BIRTH	DRIVER'S LICENSE NO.		STATE	EMAIL		PHONE NUMBER	
1. CURRENT HOME ADDRESS			CITY		STATE	ZIP CODE	
LENGTH OF TIME	STATE REASON FOR LEAVING		LANDLORD NAME			LANDLORD PHONE NUMBER	
2. PREVIOUS HOME ADDRESS			CITY		STATE	ZIP CODE	
LENGTH OF TIME	STATE REASON FOR LEAVING		LANDLORD NAME			LANDLORD PHONE NUMBER	
3. PREVIOUS HOME ADDRESS			CITY		STATE	ZIP CODE	
LENGTH OF TIME	STATE REASON FOR LEAVING		LANDLORD NAME			LANDLORD PHONE NUMBER	

PROPOSED OCCUPANT(S)

DESCRIBE EACH & EVERY PERSON WHO WILL OCCUPY THE PREMISES <i>EXAMPLE: JANE DOE, 29 BLUE EYES, RED SHORT HAIR, 5'7"</i>	3.
1.	4.
2.	5.
WILL YOU HAVE ANY PETS? IF YES, PLEASE DESCRIBE & LIST BREED OF PET(S).	

EMPLOYMENT INFORMATION

PRESENT OCCUPATION		NAME OF EMPLOYER	
HOW LONG WITH THIS EMPLOYER	PHONE NUMBER	EMPLOYER ADDRESS	
NAME OF SUPERVISOR			
PRIOR OCCUPATION		NAME OF EMPLOYER	
HOW LONG WITH THIS EMPLOYER	PHONE NUMBER	EMPLOYER ADDRESS	
NAME OF SUPERVISOR			

FINANCIAL INFORMATION

CURRENT GROSS INCOME \$	PER	<input type="checkbox"/> WEEK <input type="checkbox"/> MONTH <input type="checkbox"/> YEAR	NAME OF YOUR BANK	BRANCH OR ADDRESS	<input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	ACCOUNT NUMBER
----------------------------	-----	--	-------------------	-------------------	---	----------------

PLEASE LIST ALL OF YOUR FINANCIAL OBLIGATIONS (IF MORE CREDITORS USE ADDITIONAL SHEET OF PAPER)

NAME OF CREDITOR	ADDRESS	PHONE NUMBER	MONTHLY PAYMENT AMOUNT

EMERGENCY/PERSONAL REFERENCE INFORMATION

IN CASE OF EMERGENCY, NOTIFY:	ADDRESS	PHONE	RELATIONSHIP
1.			
2.			
3.			

PERSONAL REFERENCES	ADDRESS	PHONE	YEARS KNOWN
1.			
2.			
3.			

VEHICLE INFORMATION (PLEASE STATE EXACT NUMBER OF MOTOR VEHICLE THAT WILL BE AT THE PREMISES)

VEHICLE MAKE	MODEL	YEAR	LICENSE PLATE NUMBER
VEHICLE MAKE	MODEL	YEAR	LICENSE PLATE NUMBER
VEHICLE MAKE	MODEL	YEAR	LICENSE PLATE NUMBER
VEHICLE MAKE	MODEL	YEAR	LICENSE PLATE NUMBER

HAVE YOU EVER FILED FOR BANKRUPTCY? IF YES, DATE BK FIELD AND DESCRIBE:

--

HAVE YOU EVER BEEN EVICTED OR BEEN ASKED TO MOVE? IF YES, PLEASE DESCRIBE:

--

APPLICANT AUTHORIZATION

Applicant represents that all the above statements are true and correct and hereby authorizes MK Property Group, LLC to verify the above items including, but not limited to, the obtaining of a credit report and agrees to furnish additional credit references upon request.

INITIAL HERE _____

Applicant agrees to pay a \$15 application fee.

INITIAL HERE _____

The undersigned makes application to rent housing accommodations designated as:

Address of: _____ Apt. No. _____ City/State: _____

The rental for which is \$ _____ **Per Month** and upon approval of this application agrees to sign a rental or lease agreement and to pay all sums due, including required deposit before occupancy.

DATE

SIGNATURE OF APPLICANT

_____	_____
-------	-------

OFFICE USE ONLY

QUESTIONNAIRE		APPLICATION FEE	
APPLICATION		DEPOSIT	
DOCUMENTS		PET FEE	
COPIES		ADDITION NOTES	