

Rental Application for Residents and Occupants

*Each co-applicant and each occupant 18 years old and over must submit a separate application.
Spouses may submit a single application.*

Date when filled out: _____

<p>ABOUT YOU</p> <p>Full Name exactly as on driver's license or gov't ID card: _____</p> <p>Your street address as shown on driver's license or gov't ID card: _____</p> <p>Driver's license # and state: _____ OR gov't photo ID card #: _____</p> <p>Former last names (maiden and married): _____</p> <p>Your social security #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____ Hair color: _____</p> <p>Marital Status: single married divorced widowed separated</p> <p>Are you a U.S. Citizen? Yes No</p> <p>Do you or any occupant smoke? Yes No</p> <p>Will you or any occupant have an animal? Yes No Kind, weight, breed, age: _____</p> <p>Current home address: _____</p> <p>City/State/Zip: _____</p> <p>Home/Cell Phone: (____) _____</p> <p>Current Rent: \$ _____</p> <p>Name of apartment where you now live: _____</p> <p>Current owner/manager's name: _____</p> <p>Their phone: (____) _____</p> <p>Date moved in: _____</p> <p>Why are you leaving your current residence? _____</p> <p>_____</p> <p>Your previous home address: _____</p> <p>City/State/Zip: _____</p> <p>Apartment name: _____</p> <p>Name of owner/manager: _____</p> <p>Their phone: (____) _____</p> <p>Previous monthly rent: \$ _____</p> <p>Date moved in: _____ Out: _____</p>	<p>YOUR RENTAL/CRIMINAL HISTORY</p> <p><i>Check only if applicable:</i></p> <p>Have you, your spouse, or any occupant listed in this Application ever: Been evicted or asked to move out? Moved out of a dwelling before the end of the lease term without the owner's consent? Declared bankruptcy? Been sued for rent? Been sued for property damage? Been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before making a decision. <i>You represent the answer is "no" to any item not checked above.</i> _____</p> <p>_____</p>
<p>YOUR WORK</p> <p>Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Your gross monthly income is over: \$ _____</p> <p>Date you began this job: _____</p> <p>Supervisor's name and phone: _____</p> <p>_____</p>	<p>YOUR SPOUSE</p> <p>Full name: _____</p> <p>Former last names: _____</p> <p>Spouse's Social Security #: _____</p> <p>Driver's license # and State: _____</p> <p>OR Gov't photo ID card #: _____</p> <p>Birthdate: _____ Height: _____ Weight: _____</p> <p>Sex: _____ Eye color: _____ Hair color: _____</p> <p>Are you a U.S. Citizen? Yes No</p> <p>Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Date began job: _____</p> <p>Current monthly income is over: \$ _____</p> <p>Supervisor's name and phone: _____</p> <p>_____</p>
<p>YOUR WORK</p> <p>Present employer: _____</p> <p>Address: _____</p> <p>City/State/Zip: _____</p> <p>Work phone: (____) _____</p> <p>Position: _____</p> <p>Your gross monthly income is over: \$ _____</p> <p>Date you began this job: _____</p> <p>Supervisor's name and phone: _____</p> <p>_____</p>	<p>OTHER OCCUPANTS</p> <p><i>Names of all persons under 18 and other adults who will occupy the unit without signing the lease. Use extra page if needed.</i></p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or gov't ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or gov't ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p> <p>Name: _____ Relationship: _____</p> <p>Sex: _____ DL or gov't ID card # and state: _____</p> <p>Birthdate: _____ Social Security #: _____</p>

Previous employer: _____ Address: _____ City/State/Zip: _____ Work phone: (____) _____ Position: _____ Your gross monthly income is over: \$ _____ Date you began/ended this job: _____ Previous supervisor's name and phone: _____	<u>YOUR VEHICLES</u> <i>List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.)</i> Make/color of vehicle: _____ Year: _____ License #: _____ State: _____ Make/color of vehicle: _____ Year: _____ License #: _____ State: _____ Make/color of vehicle: _____ Year: _____ License #: _____ State: _____
<u>YOUR CREDIT HISTORY</u> Your bank's name, city, state: _____ _____ List major credit cards: _____ Other non-work income you want considered. Please explain: _____ _____ Past credit problems you want to explain (<i>Use separate page</i>)	<u>EMERGENCY CONTACT</u> Name: _____ Address: _____ City/State/Zip: _____ Work phone: (____) _____ Home phone: (____) _____ Relationship: _____
<u>WHY YOU APPLIED HERE</u> Were you referred? Yes No <i>If yes, by whom:</i> _____ Name of locator or rental agency: _____ Name of individual locator/agent: _____ Name of friend or other person: _____ Did you find us on your own? Yes No <i>If yes, fill in information below</i> On the internet Stopped by Newspaper (Name): _____ Rental publication: _____ Other: _____ _____ _____	<u>AUTHORIZATION</u> I or we authorize (owner's name) <u>Prisa Acquisition, LLC</u> to obtain reports from any consumer or criminal record reporting agencies before, during and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information on this application, including criminal background information, income history and other information required by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application Applicant's Signature: _____ Spouse's Signature: _____

Applicant must also sign the next page of this Application.