



Management & Marketing Concepts, Inc.



LEASE TERM _____

APT. NO. _____

RATE \$ _____

EARNEST MONEY \$ _____

APPL. FEE \$ _____

DATE APT. REQUIRED _____

APPLICATION

APPLICANT'S NAME _____ NO INITIALS PLEASE, INCLUDE MAIDEN NAME _____ BIRTH DATE _____ MO. DAY YEAR
 SOCIAL SECURITY NO. _____ - _____ - _____ MARRIED SINGLE DIVORCED SEPARATED
 SPOUSE'S NAME _____ NO INITIALS PLEASE, INCLUDE MAIDEN NAME _____ BIRTH DATE _____ MO. DAY YEAR
 SOCIAL SECURITY NO. _____ - _____ - _____ HOME PHONE NO. _____
 NAMES AND AGES OF ANYONE ELSE WHO WILL OCCUPY THE APARTMENT AND RELATIONSHIP _____

PRESENT ADDRESS _____ ZIP CODE _____ HOW LONG _____ YRS. MOS.
 LANDLORD'S NAME _____ PHONE NO. _____
 REASON FOR MOVING _____
 FORMER ADDRESS _____ ZIP CODE _____ HOW LONG _____ YRS. MOS.
 LANDLORD'S NAME _____ PHONE NO. _____

HAS APPLICANT, SPOUSE OR ANY OTHER PROPOSED RESIDENT EVER: FILED FOR BANKRUPTCY? NO YES
 BEEN EVICTED FROM TENANCY? NO YES HAD A CRIMINAL RECORD? NO YES
 WILLFULLY OR INTENTIONALLY REFUSED TO PAY RENT WHEN DUE? NO YES

VEHICLES-NOT ALLOWED WITHOUT WRITTEN PERMISSION. VEHICLES NOT APPROVED MAY BE TOWED AT OWNER'S EXPENSE.
 1. MAKE _____ MODEL _____ YEAR _____ COLOR _____ LICENSE NO. _____ STATE _____
 2. MAKE _____ MODEL _____ YEAR _____ COLOR _____ LICENSE NO. _____ STATE _____
 DRIVER'S LICENSE NO.-APPLICANT _____ STATE _____ DRIVER'S LICENSE NO. SPOUSE _____ STATE _____
 PET(S) NUMBER _____ TYPE(S) _____ WEIGHT(S) _____ AGE(S) _____ HOUSEBROKEN NO YES

EMPLOYER - APPLICANT'S _____ SUPERVISOR _____
 EMPLOYER'S ADDRESS _____ PHONE NO. _____
 POSITION HELD _____ HOW LONG _____ YRS. MOS. SALARY \$ _____ PER WK. MO. YR.
 PREVIOUS EMPLOYER _____
 EMPLOYER - SPOUSE'S _____ SUPERVISOR _____
 EMPLOYER'S ADDRESS _____ PHONE NO. _____
 POSITION HELD _____ HOW LONG _____ YRS. MOS. SALARY \$ _____ PER WK. MO. YR.
 PREVIOUS EMPLOYER _____

NAME OF BANK _____ BRANCH _____ CITY _____
 A/C NO. _____ CK. SAV. A/C NO. _____ CK. SAV. PERSON TO CONTACT _____
 CREDIT REFERENCES (LOCAL REFERENCES PREFERRED)
 1. _____ A/C NO. _____ PHONE NO. _____
 2. _____ A/C NO. _____ PHONE NO. _____
 3. _____ A/C NO. _____ PHONE NO. _____
 CHARACTER REFERENCE _____ PHONE NO. _____

IN CASE OF ILLNESS, ACCIDENT, EMERGENCY, PLEASE NOTIFY:
 NAME _____ RELATIONSHIP _____
 ADDRESS _____ PHONE NO. _____

I HAVE READ AND FULLY UNDERSTAND THE RULES AND REGULATIONS, INCLUDING THOSE REGARDING THE EARNEST MONEY, AS SET FORTH ON PAGE 2 OF THIS APPLICATION. I UNDERSTAND THAT THIS APPLICATION WILL BECOME A PART OF MY LEASE AGREEMENT. I HEREBY GIVE AUTHORIZATION FOR VERIFICATION OF ALL INFORMATION ABOVE, INCLUDING CREDIT AND REFERENCE CHECKS, AND OTHER INVESTIGATIVE PROCEDURES NECESSARY FOR PROCESSING THIS APPLICATION.

Tenant Applicant _____ Date _____
 Agent for Landlord _____ Tenant Applicant _____ Date _____