

APPLICATION TO RENT

LIST ALL OCCUPANT(S) IN HOUSEHOLD:

Applicant #1	First / Middle/ Last Name	Date of Birth / /	Social Security Number or ITIN - -
Driver's License / Expiration Date / State		Home Phone Number	Cell Phone Number
Other names used in the last 10 years		Email address:	
Applicant #2	First / Middle/ Last Name	Date of Birth / /	Social Security Number or ITIN - -
Driver's License / Expiration Date / State		Home Phone Number	Cell Phone Number
Other names used in the last 10 years		Email address:	
Other Occupants	Date of Birth	Other Occupants	Date of Birth
Other Occupants	Date of Birth	Other Occupants	Date of Birth

GENERAL INFORMATION:

1. Present Address:			City	State	Zip	Current Rent: \$
How Long at address?	Owner / Agent Name		Owner/ Agent Phone Number			
Reason For Moving			Do you have pets? If yes, please describe:			
2. Previous Address:			City	State	Zip	
How Long at address?	Owner / Agent Name		Owner/ Agent Phone Number			
Reason For Moving						

EMPLOYMENT:

Applicant #1:	Employer Name or Source of Income	Phone ()
Supervisor Name:		Dates of Employment
Applicant #2:	Employer Name or Source of Income	Phone ()
Supervisor Name:		Dates of Employment

CURRENT GROSS INCOME: (combined)

\$	PER	<input type="checkbox"/> Week	<input type="checkbox"/> Month	<input type="checkbox"/> Year
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BANK INFORMATION:

Bank Name:	Branch Address:	Account Number:
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In case of Emergency, notify: Name:	Relationship:	Phone ()
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REFERENCES:

1. Name		Phone ()	
Address	City	State	Zip Code
2. Name		Phone ()	
Address	City	State	Zip Code

Automobile: Color: _____ Make: _____ Model: _____ Year: _____ License#: _____

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Have you ever filed for bankruptcy? _____ Have you ever been evicted or asked to move? _____

Have you ever been convicted of selling, distributing or manufacturing illegal drugs? _____

Applicant represents that all the above statements are true and correct and hereby authorizes verification of the above items including, but not limited to, the obtaining of a credit report and agree to furnish additional credit references upon request. Applicant consents to allow owner/agent to disclose tenancy information to previous or subsequent owners/agents. Filice & Co Inc. supports the spirit and intent of all local, state and federal fair housing laws for all residents without regard to color, race, religion, sex, marital status, mental or physical disability, age, familial status, sexual orientation, or national origin.

TYPE OF RENTAL NEEDED:

Bedroom (s) Needed: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5	Price: (Amount of monthly rent) \$ _____	Date Needed:
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Applicant Signature

Date

Applicant Signature

Date

The following is required in order to process your application:

1)A photo ID 2)Income verification (one month of paystubs) 3)\$30 credit fee for each applicant 18yrs or older.

[FOR OFFICE USE ONLY]		
1.	Address	Rent Amount
2.	Address	Rent Amount
3.	Address	Rent Amount