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MARKET RATE APPLICATION

Develo	pment:_		Unit #:	#Bdrms:	_ Anticipated Move-In Date	e:
Other Needs:		_ Home Phone #:		Work Phone #:		
Last	PERS	ONS OCCUPYING THE UNIT First	T Middle		SOCIAL SECURITY NUMBER	DATE OF BIRTH
				Head		
A.		l Information:				
	1. 2.	Do you own a pet? ☐ YES Have you ever filed bankrup			o ovnlain (include dates):	Weight
	۷.	have you ever filed parikrup	icy? Little	S 🗀 NO II yes, pieas	e explain (include dates).	
	3.	Have you ever been convicted of a felony? ☐ YES ☐ NO If yes, please explain:				
	4.	Have you ever been evicted from an apartment for any reason? ☐ YES ☐ NO				
		If yes, please explain:		•		
B.	Housing Reference: (List all residences and applicable landlord reference in the past three years.) (HPI 409					
		: Address				
		To				
		own this residence? ☐ YES				
		d				
		Zip Landlord				
		s Address To				
		own this residence? ☐ YES				
	-	d		·		
		Zip Landlord				
C.	Employ	ment or Other Income Sou	rces: (List	all sources of income fo	or all adult household member	´S) (HPI 302)
		Source			Monthly Gross Income \$	
		t Person			Phone Number(
		Source			Monthly Gross Income \$	
		t Person			Phone Number()
D.		ency Contact: (Other than p			e list someone in the immedia	·
		Phone Number ()			hone Number ()	
E.	Drivers	License #:			State Issued:	
A credit	check will b	pe completed through a credit bure d by applicant. The Fair Credit Re on as to applicant's character, gene	eau. By com porting Act r	pleting this application, appl equires that management di	icant grants management permiss iscloses to applicant that an invest	ion to confirm the above
Signatur	re				Date	
Cianatur					Data	

