

APPLICATION FOR APARTMENT

APARTMENT NAME: ACADIAN VILLAGE APT. #
Desired Date of Occupancy: Rental Rate:
Applicant's Name: Date of Birth:
Phone #: Dr. Lic. #: SS#:
Present Address: City: State:
Name of Employer: How long:
Local Address: City: State:
Salary Range: Position: Phone #:
Supervisor: Permanent: Part time:

SPOUSE/ROOMMATE INFORMATION:

Name: Date of Birth:
Phone: Dr. Lic. #: SS#:
Present Address: City: State:
Name of Employer: How long:
Local Address: City: State:
Salary Range: Position: Phone #:
Supervisor: Permanent: Part time:

OTHER PERSONS TO OCCUPY UNIT WITH YOU:

Name Rel SS# DOB
Name Rel SS# DOB
Name Rel SS# DOB

CREDIT REFERENCES:

1. Acct. # Phone #
2. Acct. # Phone #

CURRENT RENTAL INFORMATION

Complex now Residing How Long Phone #
Address Rental Amount

PREVIOUS RENTAL INFORMATION

Complex Resided At How Long Phone #
Address Rental Amount

How many automobiles would keep at this address?

Year Make Model Plate #
Year Make Model Plate #

IN CASE EMERGENCY WHO DO WE NOTIFY?

Name Phone # Relation
Address City State

Applicant has paid herewith the sum of \$40.00 per applicant, receipt of which is hereby acknowledged as a non-refundable application fee. In the event the application is not approved, or if the application is approved and the applicant fails or refuses to enter into the completed lease, owner shall retain the paid fee as liquidated damages to cover the cost of taking and processing this application.

\$250.00 deposit will be required in the event of application approval. This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by an officer of said company and delivery of a lease covering said premises. Please allow a minimum of 60 days for processing.