

Apt. Name _____ Type _____ Apt. No. _____
Address _____ Zip _____ Parking No. _____ Storage No. _____

CREDIT APPLICATION

**Please fill out this credit application carefully and fully. Use separate application for each applicant.
Individual applications are required from each occupant 18 years of age or older.**

Name of applicant _____ Date of Birth _____ Phone (____) _____
Present Address _____ City, State _____ Zip _____ Phone (____) _____
How Long? _____ Reason for Leaving _____
Owner, Manager, or Apt. Name _____ Phone (____) _____
Previous Address _____ City, State _____ Zip _____ Phone (____) _____
How Long? _____ Reason for Leaving _____
Owner, Manager, or Apt. Name _____ Phone (____) _____

Proposed Occupants **List all in addition to yourself**
Name _____ Name _____
Name _____ Name _____

Employment -- Applicant Social Security Number _____ Driver's License No. _____ State _____
Present Employer _____ How Long? _____ Supervisor _____
Address _____ City, State _____ Zip _____ Phone (____) _____ Ext. _____
Employed as _____ Salary _____ per _____
Previous Employer (if less than 1 year at present employer) _____ How long? _____ Supervisor _____
Address _____ City, State _____ Zip _____ Phone (____) _____ Ext. _____
Employed as _____ Salary _____ per _____

Other Income _____ Amount _____ per _____
Bank _____ Branch Address _____
Checking No. _____ Saving No. _____ Loans _____

Credit Cards, Charge Accounts at (1) _____ (2) _____
Automobile – Make _____ Color _____ Year _____ State of Registry _____
License No. _____ Legal Owner _____ Address _____

Notify in Emergency Name _____ Relationship _____ Phone (____) _____
Cell phone (____) _____ Address _____ City, State _____ Zip _____

APPLICANT REPRESENT THAT THE ABOVE INFORMATION IS TRUE, COMPLETE AND CORRECT AND AUTHORIZES INVESTIGATION AND VERIFICATION THEREOF AND THE OBTAINING OF A CREDIT REPORT TO QUALIFY AND TO COLLECT ANY DEBTS OWED.

Applicants Signature _____ Date _____