

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 REPRESENTS 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 _____