

Rental Application

Please complete all 3 pages and return to: 2523 North Van Buren. There is drop box north of door.

| TELL US ABOUT YOURSELF Full Name | Phone () | | | |
|---|--|-------|------|--|
| | Social Security # | | - | |
| | Cell Phone: () | | | |
| Co-Applicant Name: | Cell Phone () | | | |
| Co-Applicant Date of Birth | Social Security # | | | |
| Names of Dependents | | | - | |
| List All Pets: | | | | |
| RESIDENTIAL HISTORY (PAST | 3 YEARS) | | | |
| Current Address: | <u>dress:</u> Apt# | | | |
| | State Zip | | | |
| | ed In Rent \$ | | | |
| Reasons for Leaving | | | | |
| Owner / Agent | (Relative? YN) Phone () | | | |
| Previous Address: | | | | |
| | State Zip | | | |
| | Rent \$ | | | |
| | | | | |
| Owner /Agent | (Relative? YesNo) Phone() | | | |
| | | | | |
| PLEASE DESCRIBE YOUR CR | | | | |
| Have you declared bankruptcy in the past seven (7) years? | | | | |
| Have you ever been evicted from a rental residence? □ Yes | | | | |
| Have you had 2 or more late rental payments in the past year? | | | | |
| Have you ever intentionally refused to pay rent when due? | | | | |
| Have you or anyone in your | household ever been convicted of a felony? | ☐ Yes | □ No | |
| Do you or anyone in your household smoke? | | | | |

EMPLOYMENT INFORMATION

| Your Status:Full time | ePart Time Student U | nemployed |
|--|--|---------------------------------------|
| | | |
| | Employed as | |
| Supervisor Name | Phone () | |
| Salary \$ p | oer | |
| | | |
| Co-Applicant Status: | Full timePart TimeStudent | _ Unemployed |
| 15. 5 | | |
| Dates Employed | Employed as | |
| Supervisor Name | Phone () | |
| Salary \$ | per | |
| | ss than 12 months, give name & phone | |
| and person (banker, empreveal alimony, child suppapplication. Amount \$ PLEASE LIST YOUR REFER | s of income that you would like us to coroloyer, etc) who we may contact for coport, or spouse's annual income unlessy Source/Contact Name | you want us to consider it in this |
| Banking Accounts: Name | Type of Account _ | |
| | Type of Account | |
| Personal Reference or Em | | |
| | Phone | |
| Drivers License: State | Number | |
| Vehicle Information: C | Color /Make /Model | Year |
| License Plate State | License Plate # | |
| | ATION: nal information that might help manage | · · · · · · · · · · · · · · · · · · · |
| | act you about this application? | |
| Day Phone # | | |



2523 N Van Buren ~ Enid, OK 73703 (580) 233-7368

Authorization & Release of information

I believe that the statements I have made are true and accurate. I hereby authorize a verification check to be made of information I provided and communication with any and all names listed on this application. I agree to permit an investigation of my credit, criminal, tenant history, banking and employment for the purposes of renting a house or apartment with Property Management Partners of Enid, LLC.

I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

If the application is not approved or accepted by the owner or agent; the applicant(s) hereby waives any claim for damages by reason of non-acceptance which the owner or agent may reject.

I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application and does not constitute a rental or lease agreement, in whole or part.

| Applicant (please print) | |
|--------------------------|------|
| Sign | Date |
| Co-applicant (print) | |
| Sign | Date |