## RENTERS SCREENING

PAGE 01

RENTERS SCREENING
APPLICATION FOR OCCUPANCY

Please fill out completely. Failure to complete this application in full including daytime phone numbers, will seriously delay completion of this application.

TO BE COMPLETED BY LANDLO	RD ONLY				
Customer Name	Daytim	Daytime Contact #			
Fax #					
PLEASE CHECK ONE OF THE FO					
Full w/o PoliceCredit Only	Police Or	nly Full w/Police	Credit/Pe	olice Only	
RENTERS SCREENING PHO B16-229-7500			816-22	ERS SCREENIN 9-3220	IG FAX
	******	****			
Desired date of occupancy		Date_	1 2 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	11 1.0.100 0.111 0.4	
Name First			SS#		
First	Middle	Last			
Date of Birth		Check one: _	MarriedSing	gleDivorced	Separated
Spouse Name First Middl			SS#		,
First Middl	e La	ıst			_
Spouse Date of Birth		Maiden Nam	e (if less than 2 yea	rs)	
NO. Of people who will occupy:	Adults (over age 18)		Childr	en (Thru age 18)	
Child's Name		SS#		Child's Birth Date	
Child's Name	- All Title T	SS#		Child's Birth Date	
In case of emergency, notify:					
	Name	Address	Phone		
	Part J	– RESIDENCE HI	STORY		
A Present					
Address					
		Ren	: \$ From	Japania kanana kana	To
(City, State, Zip)					•
Present Landlord	•	Phone			
E. XXVIVAS AUGUSS		· Rent \$			`n
(City, State, Zip)				<i>•</i>	
Previous Landlord		Phone			

02/08/2006 01:48 816-229-3220 RENTERS SCREENING PAGE 02  $\mathbf{C}$ Previous Address Phone Rent S From To (City, State, Zip) Phone Previous Landlord Part II – EMPLOYMENT Phone to verify\_\_\_\_\_ Employed by\_\_\_\_\_ To\_\_\_\_\_ Income S\_\_\_\_\_ Employed by Phone to verify To\_\_\_\_\_Income \$\_\_\_\_\_ APARTMENT INFORMATION (Must be completed by owner) Occupants Adults Address of Apt City Student Y N Children Ages Rented Zip State Length of Lease Notice Required Apt Size 2 BDM House Check Dep. Move in Date MO Rent Rent Includes 1bdm 3bdm Studio Cash Dep Heat\_\_\_ Elect\_ Days 60 Months 12 Driver's Lie NO\_\_\_\_\_ Number of Cars (Inc CO. Cars) License Color Year Color Make A processing charge of S\_ will be retained by the Landlord. Non-Refundable. This application must be signed by all adults who will occupy the apartment before it can be considered by Landlord. Acceptance of this application and any monies deposited herewith is not binding upon Landlord until approved by Landlord in writing. If approved, all monies deposited with this application will be held as a reservation deposit to be either returned to applicant or credited toward any deposit which may be required of applicant at the time of rental agreement is executed. If the apartment is held for applicant for more than \_\_\_\_\_\_days, all monies deposited shall be forfeited to Landlord as liquidated damages. By signing, the applicant recognizes that an investigative report may be prepared whereby information is obtained through interview. This inquiry includes information as to your character, general reputation, employment, credit and mode of living. Renters Screening Service (RSS) has my authorization to research all public records for criminal history for the past 7 years. I further authorize RSS to use a photocopy of my signature when necessary to verify references; I request that such a photocopy be fully honored. The application may be disapproved as a result in any misrepresentation or insufficient information as a result of an incomplete application. You have the right to make a written request in a reasonable period of time to

receive additional information about the nature and sco	pe of this investigation.
Reservation Deposit with application S	Signature Applicant
Reservation Deposit for pets (if allowed)\$	**************************************
Total Deposit with application \$	Signature Spouse