APPLICATION FOR RESIDENCY AND REQUEST FOR CREDIT REPORT

Date: _____

Application is made to lease the premises known as _____
for _____ year(s) beginning on the _____ day of _____, 20_____, for the monthly rent of $_____, payable in advance on the first day of each month.

List price: $_____

IT IS IMPORTANT THAT ALL THE FOLLOWING INFORMATION BE GIVEN:

1) Name (**please print**): _____ S.S #: _____
First MI Last

Date of Birth: _____ Home Phone: (_____)_____

2) Current Address:_____
Street City State Zip Code

How Long? _____ Name of Landlord/Mortgage Co.: _____

Their Phone #: (_____) _____ Monthly Rent/Mortgage Payment: $_____

Mortgage Account #: _____

3) Previous Address (if less than 2 years at current address) How long?_____

Previous Address: _____
Street City State Zip Code

Name of Landlord/Mortgage Co.:_____

Their Phone #: (_____)_____ Monthly Rent/Mortgage Payment: $_____

Mortgage Account #: _____
(If #2 and #3 do not total 2 years of residence, please complete the section below)

Previous Address: _____ How Long? _____
Street City State Zip Code

Landlord: _____ Phone: (_____)_____ Rent: $_____

4) Employer: _____ How Long? _____

Business Address: _____ Phone #: (____)_____

Position: _____ Base Salary: $_____

Other Income: $_____ Source: _____

5) Previous Employment (if less than 1 year at present position):

Employer: _____ How Long? _____

Business Address: _____ Phone # (_____)_____

Position: _____ Base Salary $_____

6) Additional Occupants: How Many? _____

Name: _____ Date of Birth: _____ S.S. # _____

Employer: _____ How Long? _____

Business Address: _____ Phone # (_____)_____

Position: _____ Yearly Base Salary: $_____

Other Income: $_____ Source: _____

7) Pets: How Many? _____ What Type: _____

8) TOTAL Outstanding Debt: $_____ (include credit cards, car payments, loans, etc.)

Average monthly payments toward your total outstanding debt: $_____

9) Payments: Alimony $_____ Child Support $_____ Other $_____

10) Are there any past or current tax liens, judgments or lawsuits against any applicant?

❑ YES ❑ NO TYPE: _____

11) Has any applicant ever filed bankruptcy? ❑ YES ❑ NO If Yes-Date: _____Type: _____

12) Notify in case of Emergency: _____ Phone #: (_____)_____

Address: _____ Relationship: _____

13) Reference: _____ Phone #: (_____)_____

Address: _____

14) Remarks (unusual circumstances): _____

_____

I (We) certify that the foregoing information is true and accurate to the best of my (our) knowledge. I (We) authorized *John Hall & Associates, Inc.* and its Associate,_____BARRY ZWEIG_____, to obtain a credit report and rental history on me (us) and provide the owner ONLY with a copy. I (We) understand that my (our) application for residency may be accepted or denied as a result of the credit report and/or rental history. If I (we) desire a copy of the credit report, I (we) must personally obtain it from a credit reporting bureau.

The above terms and conditions are hereby approved and accepted, and receipt of copy is hereby acknowledged.

_____

APPLICANT DATE APPLICANT DATE

_____

ASSOCIATE FOR JOHN HALL & ASSOCIATES, INC.