



QUALIFYING CRITERIA

1. SEPARATE APPLICATION REQUIRED FROM EACH OCCUPANT AGE 18 OR OLDER
2. CURRENT VALID LEGAL PHOTO ID – COPY AND ORIGINAL
3. SOCIAL SECURITY CARD – COPY AND ORIGINAL
4. MONTHLY INCOME REQUIRED IS 2½ TO 3 TIMES THE RENT. PROOF REQUIRED (COPY AND ORIGINAL):
 - a) LAST FOUR PAYROLL STUBS
 - b) 1099 IF SELF EMPLOYED
 - c) AFDC “NOTICE OF ACTION”
 - d) S.S.I. FORMS
 - e) OTHER VERIFIABLE PROOF
5. VERIFICATION OF CURRENT EMPLOYMENT – SEE FORM
6. VERIFICATION OF CURRENT RESIDENCY – SEE FORM
7. APPLICATION FEES ARE \$42.00 PER APPLICANT
8. MONTH-TO-MONTH RENTAL
9. PRIOR EVICTIONS MUST HAVE BEEN SATISFIED THROUGH THE COURT
10. CASHIER'S CHECK OR MONEY ORDER ONLY IS ACCEPTED ON ALL INITIAL PAYMENTS (APP FEES, DEPOSIT AND FIRST MONTH'S RENT).

Updated 7/28/2011

RENTAL APPLICATION

Separate application required from each occupant age 18 or older



Applicant's Last Name _____ First _____ Middle _____ Jr./Sr./III _____

Social Sec # _____ / _____ / _____ Birthdate _____ / _____ / _____ Driver Lic # _____ State _____

Home Phone (_____) _____ Work Phone (_____) _____ Cell Phone (_____) _____

LIST EVERYONE WHO WILL LIVE WITH YOU:

Full Name _____ Relationship to Applicant _____ Age _____

RESIDENCE HISTORY



Current Address _____ City _____ State _____ Zip _____

Dates Lived There: _____ to _____ Reason for Moving: _____

Owner/Manager Name: _____ Phone Number: (_____) _____

Amount of rent paid each month _____



Previous Address _____ City _____ State _____ Zip _____

Dates Lived There: _____ to _____ Reason for Moving: _____

Owner/Manager Name: _____ Phone Number: (_____) _____

Amount of rent paid each month _____



Previous Address _____ City _____ State _____ Zip _____

Dates Lived There: _____ to _____ Reason for Moving: _____

Owner/Manager Name: _____ Phone Number: (_____) _____

Amount of rent paid each month _____

EMPLOYMENT HISTORY



Current Employer _____ Supervisor's Name _____ Area Code/Phone Number _____

Employer's Address _____ Position _____ How Long _____ Salary _____



Previous Employer	Supervisor's Name	Area Code/Phone Number
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Employer's Address	Position	How Long	Salary
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INCOME INFORMATION

Your gross employment income (before deductions): \$ _____
 Other monthly income: \$ _____
 Source(s) of other income: _____

Total Gross Monthly Income: \$ _____

FINANCIAL INFO (REQUIRED)

Name of Bank	Account Number
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Checking Account

Savings Account

Credit Card

MISCELLANEOUS (please initial following each statement)

Pets are only allowed with permission of owner/agent and require an additional deposit of \$300. per pet. _____
 Water filled furniture such as waterbeds requires the resident to carry a special insurance policy. _____

Ever been evicted? NO ___ YES ___ WHEN _____ Ever filed for bankruptcy? NO ___ YES ___ WHEN _____

Do you Smoke? _____

REFERENCES AND EMERGENCY CONTACT INFORMATION



Name of Personal Reference	Relationship	Area Code/Phone Number
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Address	City	State	Zip
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Name of Emergency Contact	Relationship	Area Code/Phone Number
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Address	City	State	Zip
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APPLICANT'S AUTHORIZATION TO OBTAIN BACKGROUND REPORTS

I certify that all the information given above is true and correct to the best of my knowledge. I understand that my rental agreement/lease may be **terminated** if I have made any material misrepresentation in this application. I hereby authorize Owner/Manager to obtain credit and other background reports necessary to verify the information and references provided above. I agree to pay, in addition to rent and security deposit, a *nonrefundable fee* of \$ _____, which shall be used to defray the costs associated with obtaining the above-mentioned reports.



Applicant's Signature: X _____ Date: _____

OWNER/MANAGER'S NOTES:



AUTHORIZATION FOR EMPLOYMENT VERIFICATION

Instructions: Fill this form out completely and sign where indicated. Present this form to your employer to fill out the bottom portion and return it to Empire Management, Inc.

APPLICANT'S PORTION

Applicant's Name: _____

Applicant's Address: _____

Social Security #: _____

Current Employer: _____

Employer's Address: _____

Employer's Phone Number: (____) _____ Fax Number: (____) _____

I hereby consent to the release of the following information to Empire Management, Inc.



Signature _____ Date _____



EMPLOYER'S PORTION (Employer to fill out, NOT APPLICANT)

The above named person has applied to rent property from Empire Management, Inc. You were listed as the applicant's current employer. By signing above, the applicant has consented to the release of information regarding employment history. Someone from this office will contact you to verify that your company filled out this verification form.

Length of employment? From _____ To _____ Position Held? _____

Gross Income \$ _____ per Month _____ Week _____ Hour _____

Your Name _____ Title _____

Telephone No. (____) _____ Today's Date _____



AUTHORIZATION FOR RESIDENCY VERIFICATION

Instructions: Fill this form out completely and sign where indicated. Present this form to your landlord to fill out the bottom portion and return it to Empire Management, Inc.

APPLICANT'S PORTION

Applicant's Name: _____

Applicant's Address: _____

Social Security #: _____

I hereby consent to the release of the following information to Empire Management, Inc.



Signature _____ Date _____



LANDLORD'S PORTION (Landlord to fill out, NOT APPLICANT)

The above named person has applied to rent property from Empire Management, Inc. You were listed as having rented to the applicant either currently or in the past. By signing above, the applicant has consented to the release of information regarding rental history. Someone from this office will contact you to verify that you or your agent filled out this verification form.

How long did applicant reside at above address? From _____ To _____

Monthly rent \$ _____ for # bedrooms _____ family size _____

Was rent paid: On Time _____ Sometimes Late _____ Usually Late _____

Would you rent to this resident again? Yes _____ No _____

Resident's housekeeping practices are: Good _____ Average _____ Poor _____

Will resident receive a full refund of security deposit? No _____ Yes _____

Has resident ever been issued any Notice to Perform? No _____ Yes _____ Reason _____

Reason resident is moving: Eviction _____ Landlord's 30/60 Day Notice _____
Resident's Notice of Intent _____ None Given _____

ARE YOU RELATED TO APPLICANT? Yes _____ No _____

Your Name _____ Title _____

Telephone No. (____) _____ Today's Date _____