TENANCY APPLICATION

Today's Date	oday's Date Move-in Date Reques				Proper	ty Address Re	Address Requested					
APPLIC	CANT											
			M.I.	Last Name - Legal				Social Security Number				
Driver's License Number / State			Date of 1	Birth	Home Ph	ione	ne Work Pho		Phone Cel		or Pager	
Email Address Fax			Fax Nun	Number How did you hear about us?					<u> </u>			
Current Street Address			City		Sta	tate Zip		Do you rent		rent	or own?	
How long at above address? Payment A		Payment Ar	nount	Reas	son for Lea	for Leaving			<u> </u>			
Current Landlord Landlord Ad			ddress	1						Landlord Phone		
Previous Street Address			City		Sta	te	Zip		Did you rent or own?			
How long at this address? Payme.		Payment Ar	Amount Re		eason for Leaving							
Previous Landlord Landlord's .			Address					Landlo	Landlord's Phone			
Current Employer Address (Street, City, State, Zip)												
Date Hired C	Date Hired Occupation				Annual Salary					Telephone		
PERSONAL												
Pets to occupy residence (Number, breed, size)				Number of adults Children under 18 Do you s					you smoke?	smoke? Have you been evicted?		
Are you, your chil	ldren, or you	ou require	ou require special accommodations and what					Felony Convictions				
Vehicle – Year, Make, and Color				License Number						State		
Vehicle – Year, Make, and Color				License Number						State		
BANK I	REFERE	ENCES (App	licable o	only i	f self-en	ployed an	d verifyi	ng in	come via b	ank	statements)	
Bank Name				Savings Account Number					Bank Phone Number			
Bank Name				Checking Account Number				Bank Phone N			Number	
IN CASE OF EMERGENCY CONTACT												
Name				Address (Street, City, State, Zip)						Telephone		
PERSONAL REFERENCES (List persons other than emergency contact)												
Name				Address (Street, City, State, Zip)						Telephone		
Name				Address (Street, City, State, Zip)						Telephone		
APPROVALS												
A photocopy of valid photo identification and proof of income must be included to complete this application. I certify that all the information given above is true and correct and understand that my lease or rental agreement may be terminated if I have made any material false or incomplete statements in this application. I authorize verification of the information provided in this application fro m my credit sources, credit bureaus, current and previous landlords and employers, and personal references. This permission will survive the expiration of my tenancy, when accessed for a legitimate business purpose related to my tenancy. I understand that the \$30 fee for verifying this tenancy application is not a deposit or rent and will not be applied to future rent or refunded, even if this application is declined. Applicants understand the Security Deposit must be paid within 48 hours of approval and is NON REFUNDABLE if the applicant does not choose to occupy the property. Rent will begin no later than 5 days after application is approved or upon available occupancy. A deposit paid by the applicant is refundable only if applicant is not approved; non-refundable if applicant is approved, but fails to take occupancy of the rental unit.												
Applicant or Co-signer's Signature						Legerity	Legerity Services Approved by (Office use only) Date					

Legerity Property Management, Inc.