



Rental Application

Cell: (801)835-5592
Fax: (801)747-5208

My **HOMETOWN** Properties

_____/_____/_____
Date Application Received Prospective Property Address _____/_____/_____
Requested Move-In Date

Personal Information:

Name of Applicant _____ - _____ - _____ _____/_____/_____
SSN Date of Birth

Initial if over 18 years of age Drivers License # State Issued

Present Address: City, State Zip Code

Own Rent (Please circle) Monthly Payment or Rent: \$

Why moving? _____

Home Phone Work Phone w/extension Alternate Cell Phone

Cell Phone E-mail Address E-mail Address

Have you ever been involved in a foreclosure for any reason? YES / NO If yes, explain _____

Have you ever been evicted for any reason? YES / NO If yes, explain _____

Have you ever been convicted of a felony? YES / NO If yes, explain _____

Have you ever filed bankruptcy? YES / NO Date: _____/_____/_____

Are you in the military now/in the past? YES / NO Do you plan to enlist? YES / NO

Do you have pets? YES / NO Describe:

Does anyone in the household smoke? YES / NO

Occupant Information:

Name	Date of Birth	SSN	Relationship

Employment Information for _____:

- | | | |
|------------------|-----------------------------------|----------------------|
| Present Employer | Address | Phone Number |
| Title/Occupation | Monthly Salary/Weekly Gross Wages | Length of Employment |
- | | | |
|-------------------|-----------------------------------|----------------------|
| Previous Employer | Address | Phone Number |
| Title/Occupation | Monthly Salary/Weekly Gross Wages | Length of Employment |
- | | | |
|-------------------|-----------------------------------|----------------------|
| Previous Employer | Address | Phone Number |
| Title/Occupation | Monthly Salary/Weekly Gross Wages | Length of Employment |

The undersigned warrants and represents that all statements are true and agrees to execute upon presentation a lease in usual form, a copy of which the applicant has had occasion to examine, which lease may be terminated by the Lessor if any statements herein made are incomplete or not true.

The undersigned authorizes management to contact any references listed, including past and present landlords and employers and obtain a current credit check and criminal background check.

All persons will be treated fairly and equally without regard to Race, Color, Religion, Sex, Handicap, Familiar Status or National Origin in compliance with the Fair Housing Act.

Date

1. _____
Signature of Applicant

Printed Name of Applicant

Date

2. _____
Signature of Applicant

Printed Name of Applicant

Date

3. _____
Signature of Applicant (if applicable)

Printed Name of Applicant

Date

Signature of Owner/Agent