



Notice: Only persons 18 years of age or older may apply for tenancy and enter into a legal lease agreement

ADDRESS BEING APPLIED FOR		RENT AMOUNT		START DATE		REFERRED BY	
APPLICANT INFORMATION							
LAST NAME		FIRST NAME		M.I.	SSN		DRIVERS LICENCE NO.
BIRTHDATE		HOME PHONE		CELL PHONE		EMAIL	
CURRENT ADDRESS							
STREET ADDRESS				CITY		ST	ZIP
DATE IN		DATE OUT		LANDLORD/COMPANY NAME		LANDLORD PHONE	
MONTHLY RENT		REASON FOR LEAVING					
PREVIOUS ADDRESS							
1. STREET ADDRESS				CITY		ST	ZIP
DATE IN		DATE OUT		LANDLORD/COMPANY NAME		LANDLORD PHONE	
PREVIOUS ADDRESS							
2. STREET ADDRESS				CITY		ST	ZIP
DATE IN		DATE OUT		LANDLORD/COMPANY NAME		LANDLORD PHONE	
EMPLOYMENT/INCOME VERIFICATION							
1. OCCUPATION			COMPANY NAME			MONTHLY SALARY/WAGE	
SUPERVISOR NAME			SUPERVISOR PHONE		START DATE	END DATE	
2. OCCUPATION			COMPANY NAME			MONTHLY SALARY/WAGE	
SUPERVISOR NAME			SUPERVISOR PHONE		START DATE	END DATE	
OTHER INCOME SOURCE					MONTHLY INCOME		
OTHER INCOME SOURCE					MONTHLY INCOME		
STUDENTS ONLY							
PERMANENT ADDRESS				CITY		ST	ZIP
PARENT #1 NAME, ADDRESS AND PHONE							
PARENT #2 NAME, ADDRESS AND PHONE							
DO YOU INTEND ON RECEIVING FINANCIAL SUPPORT FROM YOUR PARENTS?					YES	NO	AMOUNT/MO. \$ _____
DO YOU INTEND ON PAYING RENT WITH STUDENT FINANCIAL AID?					YES	NO	
FINANCIAL AID SOURCE							AMOUNT/YR. \$ _____
BACKGROUND INFORMATION							
HAVE YOU EVER BEEN EVICTED?		YES	NO				
HAVE YOU EVER BROKEN A LEASE OR RENTAL AGREEMENT?		YES	NO				
HAVE YOU EVER BEEN SUED FOR NON PAYMENT OF RENT AND/OR DAMAGES TO PROPERTY?				YES	NO		
HAVE YOU EVER DECLARED BANKRUPTCY?		YES	NO				
HAVE YOU EVER BEEN CONVICTED OF A FELONY?		YES	NO				
COMMENTS							

I, the undersigned, authorize Carson Property Management, LLC., its agents, successors, and assigns to obtain an investigative consumer credit report including but not limited to credit history, landlord/tenant court record search, criminal record search, and registered sex offender search. I authorize the release of information from previous or current landlords, employers, and bank representatives. This investigation is for resident screening purposes only, and is strictly confidential. I hereby hold Carson Property Management, LLC., free and harmless of any liability for any damages arising out of any improper use of this information by any company or agency with which Carson Property Management, LLC., is affiliated. I further grant permission for Carson Property Management, LLC., to obtain new reports if the lease agreement is terminated for whatever reason, before the stated lease end date, or if I owe money upon vacating the rental property.

I understand that the information provided in this application will be used to determine my tenancy worthiness and any false or misleading information contained within can be used to terminate my lease agreement. The information I have provided in this application is true and accurate.

signature of applicant

date

printed name of applicant

THIS SECTION IS TO BE COMPLETED BY LANDLORD OR COMPANY

Did the individual live at this address? _____ yes no

From _____ to _____ yes no

Did the individual give proper notice? yes no

Are there any outstanding debts? yes no

Were there any late charges? yes no

If yes, how many? _____

Were there any insufficient payments? yes no

If yes, how many? _____

Were/Are all the lease conditions met and rules complied with to date? yes no

Would you rent to this individual in the future? yes no

Comments: _____

Representative Signature: _____

Date _____