Application For Lease

How can we contact you?

Full Name:_____

SSN:____-

Date of Birth: ____/ ____

Current Residence

Previous Residence

Landlord name:_____

Landlord phone: _____

How Long: From____To____ Monthly Rent:_____

Address:	Address:
Apt number:	Apt number:
City/State/Zip:	City/State/Zip:

How Long: From	To
Monthly Rent:	

Current Employment

Previous Employment

Company:		_
Address:		
City/State/Zip:		
Supervisor:		
Your Position:		_
How Long: From	to	
Cross Incomo:	nor	

Gross Income:_	per
Phone:	

Address:
City/State/Zip:
Supervisor:
Your Position:
How Long: From to
Gross Income: per

Phone:_____

Company:_____

Other income you wish considered

Source:	Monthly Amount:
Source:	Monthly Amount:

In Case of an emergency, Notify: _	Relationship:
Address:	Telephone number

Home:	()
Work:	
Cell:	()
Email:	

Additional occupants

Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:
Name:	Relationship:	Age:

Pets: Yes / No What kind: _____ How many: _____

Does anyone who will be living here smoke?

Please indicate the amount of money you will put down toward the option/purchase: \$_____

Authorization and Release

I certify that the information given is complete and correct. The Landlord or his agent is hereby expressly authorized to verify the accuracy and correctness of these statements, to communicate with my present and former employers, creditors, and landlords, and to procure such other information (including credit reports) which the Landlord may require to evaluate this application. I understand that additional resources may be used to verify this application and I release all parties from liability for damages for issuing such information in good faith.

Signature_____ Date____

Application fee: \$50

Please complete one copy of this form for each adult and email to: WinWinPropertyLLC@Yahoo.com