

Date:	Name: Phone Number:									
Community Name:			Apartment/Lot Number: Monthly Rent:							
Have you already spoken with an agent?			Name of Agent:							
Desired Lease Term:			Desired Move-In Date:							
Resident Referral?	Other:									
If yes, name of referring resident or referral source:										
APPLICANT INFORMATION Full Legal Name (First, MI, Las	it):			Date of Birth:						
Social Security Number: Driver's License: State Issued:										
NAMES OF PERSONS UNDER 18 WHO WILL ALSO OCCUPY THE APARTMENT OTHER THAN YOURSELF										
Name:				Date of Birth:						
Name:	Name:									
Name:				Date of Birth:						
CURRENT ADDRESS Street Address:			City:		State:	Zip:				
			-			ΖIΡ.				
Best Contact Phone #:	Add	ditional Phone #:		E-mail address						
How long at this address? Yea	rs: Months:	From:	To:		Monthly Ren	t Paid:				
Landlord/Management:		Phone #:		Reason for Lea	iving:					
PREVIOUS ADDRESS Street Address:			City		State:	Zip:				
			City:							
How long at this address? Yea	rs: Months:	From:	To:		Monthly Ren	t Paid:				
Landlord/Management:		Phone #:		Reason for Lea	aving:					
CURRENT EMPLOYMENT /F Company Name:	ENT AND TWO YEARS TAX RETURNS Gross Monthly Income:									
Street Address:			City:		State:	Zip:				
Supervisor:	Phone #:		Length of Employme			Ter				
PREVIOUS EMPLOYMENT			Years: Mon	uis. r	rom:	To:				
Company Name:		F	Position:		Gross Monthly	Income:				
Street Address:	City:	State: Zip:								
Supervisor: Phone #:			Length of Employme Years: Mon		rom:	To:				
ADDITIONAL INFORMATION										
Have you or ANY member of your household INCLUDING JUVENILES: 1. EVER been arrested, cited, prosecuted, plead quilty to or been convicted of a crime? Image: Conversion of the second s										
1. EVER been arrested, cited, prosecuted, plead guilty to or been convicted of a crime?										
3. EVER been or currently are a member of a gang?										
5. Currently involved in ANY criminal activity?										
6. EVER been evicted or had a forcible detainer filed against you?										
7. EVER moved to avoid eviction or because of problems with other tenants or a landlord?										

ADDITIONAL INFORMATION (CONT'D)											
Explain ALL "YES" answers IN DETAIL:											
PETS (NAME, COLOR, SEX, BREED AND WEIGHT INFORMATION IS ONLY REQUIRED FOR CATS AND DOGS)											
Pet Type: Name:							Color:				
🗆 Cat 🗖 Dog		Breed/Mi	x:				Sex:		Approximate Weight:		
Other:											
VEHICLES Year:	Make:			Model:			Color:		License Plate #		
Tear.	make.						00101.	'			
Year:	Make:			Model:			Color:	I	License Plate #:		
BANKING INF	ORMATI	ON									
Type of Account: Checking Savings Bank Name:						Approximate Balance:					
Type of Accour	nt: 🛛 Ch	ecking	Savings	Bank Name: Apr			Approximate	Balance:			
CREDIT REFERENCES (CREDIT CARDS/CAR PAYMENTS/OTHER LOANS) Company Name: Phone #:											
Present Balance:					Monthly Payment:						
Company Name:					Phone #:						
Present Balance:				Monthly Payment:							
EMERGENCY CONTACT Name: Relationship: Phone #:											
				ononip.							
Street Address: City: State: Zip:						Zip:					

IMPORTANT INFORMATION – PLEASE READ BEFORE SIGNING AUTHORIZATION

Applicant understands that once the application has been approved, an earnest money deposit is required for taking the property off the market. Once the applicant is approved by the Management, and a rental agreement is entered into, the earnest money deposit will be credited to the required security deposit. Said deposit will be <u>non-refundable</u> if the applicant fails to enter into the rental agreement or fails to take occupancy on the date specified. **Cashier's check or money order is required for payment of the deposit and the first month's rent.** Applicant agrees to sign a rental or lease agreement and to pay all sums due, including requested deposits before occupancy.

Applicant understands that failure to sign this application and provide complete information will cause delays in processing and may cause the application to be rejected or another completed application to be accepted.

Applicant understands that information will be requested from various federal, state and other agencies and entities, public and private, which maintain records concerning past activities relating to driving, consumer credit, criminal, civil and other experiences as well as claims involving insurance company files.

Applicant represents that all of the above statements are true and correct. Applicant acknowledges that ANY false information contained herein constitutes grounds for rejection of this application if discovered before or after move-in. Management reserves the right to verify application information now and in the future. This application is preliminary only and does not obligate Management to execute a lease or deliver possessions of proposed premises. By signing this application, applicant authorizes all persons/firms named and unnamed in this application to freely provide any and all requested information concerning the applicant and hereby waives all right of action for any consequences resulting from such information.

Dated:

Signature:

Print Name:

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