

# ELS TOWER Rental/ Leasing Application Form

Today's Date: \_\_\_\_\_ Occupancy Date Desired: \_\_\_\_\_

Rental Price Range: \_\_\_\_\_ Dates of Occupancy : \_\_\_\_\_

## APPLICANT'S PERSONAL INFORMATION

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Email address: \_\_\_\_\_

Passport #(if not a Filipino) \_\_\_\_\_ Issuing Country \_\_\_\_\_ Type: \_\_\_\_\_

Home Phone # \_\_\_\_\_ Work #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

Additional Occupants (List every occupant name and their relationship below, including children)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How long do you plan on living in the next rental home that meets your needs? \_\_\_\_\_

Do you have renter's insurance? \_\_\_\_\_ Do you have any water-filled furniture? \_\_\_\_\_

Have you ever broken a lease? \_\_\_\_\_ Have you ever refused to pay rent for any reason? \_\_\_\_\_

Have you ever been evicted or asked to leave a rental unit? \_\_\_\_\_

Ever filed for bankruptcy? \_\_\_\_\_ Ever been convicted of a crime \_\_\_\_\_

Will you give us permission to do a criminal background check? \_\_\_\_\_

Currently have any utilities in your name? \_\_\_\_\_

Currently have phone service in your name? \_\_\_\_\_

Is there anything to prevent you from placing utilities or phone in your name? \_\_\_\_\_

Do you know of anything or any reason which may interrupt your ability to pay rent? \_\_\_\_\_

## RESIDENCE HISTORY

Present Street Address \_\_\_\_\_ City \_\_\_\_\_

Dates lived at this address? \_\_\_\_\_ Own \_\_\_\_\_ Rent \_\_\_\_\_

Current Phone \_\_\_\_\_ How many pets do you own? What kind? \_\_\_\_\_

How long at present address? \_\_\_\_\_ Leaseholder: \_\_\_\_\_

Name of present landlord/owner/mortgage company: \_\_\_\_\_

Address of present landlord/mortgage company: \_\_\_\_\_

Landlord's phone: \_\_\_\_\_ Monthly payment: \_\_\_\_\_

Reason for moving: \_\_\_\_\_ Is your rent/mtg current? \_\_\_\_\_

Number of late payments? \_\_\_\_\_ Security Deposit Amount currently held by landlord? \_\_\_\_\_

Previous Residence Address: \_\_\_\_\_

Previous landlord: \_\_\_\_\_ Previous landlord's #: \_\_\_\_\_

Dates at this address: \_\_\_\_\_ Reason for moving? \_\_\_\_\_

Was your Full Security Dep. Returned? \_\_\_\_\_ # of late payments? \_\_\_\_\_

Monthly payment? \_\_\_\_\_

Previous Residence Address: \_\_\_\_\_

Previous landlord: \_\_\_\_\_ Previous landlord's #: \_\_\_\_\_

Dates at this address: \_\_\_\_\_ Reason for moving? \_\_\_\_\_

Was your Full Security Dep. Returned? \_\_\_\_\_ # of late payments? \_\_\_\_\_

Monthly payment? \_\_\_\_\_

### INCOME HISTORY

Applicant's current employment status:

Full-time \_\_\_\_\_ Part-time (less than 32hrs) \_\_\_\_\_ Student \_\_\_\_\_ Retired \_\_\_\_\_ Self-employed \_\_\_\_\_

Unemployed \_\_\_\_\_ Other \_\_\_\_\_

Primary source of employment:

Employer : \_\_\_\_\_ Supervisor's name: \_\_\_\_\_

Average Weekly hours: \_\_\_\_\_ How long with present employer? \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Annual Income: \_\_\_\_\_

Please indicate Weekly, Bi-Weekly, Monthly, or Annual Average Take home: \_\_\_\_\_

Additional Employment

Employer: \_\_\_\_\_ Supervisor's name: \_\_\_\_\_

Average Weekly hours: \_\_\_\_\_ How long with present employer? \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Phone: \_\_\_\_\_

Position: \_\_\_\_\_ Annual Income: \_\_\_\_\_

Please indicate Weekly, Bi-Weekly, Monthly, or Annual Average Take home: \_\_\_\_\_

OR if currently enrolled:

Name of School: \_\_\_\_\_ Year \_\_\_\_\_ Expected Graduation: \_\_\_\_\_

Program: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

### ADDITIONAL INCOME / PAYMENT INFORMATION

In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1st Emergency Contact: \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone# \_\_\_\_\_ 2nd Phone# \_\_\_\_\_

2nd Emergency Contact: \_\_\_\_\_

Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone# \_\_\_\_\_ 2nd Phone # \_\_\_\_\_

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's rent? \_\_\_\_\_

**ADDITIONAL INCOME: (optional)**

If there are additional, verifiable sources of income you would like considered, Please list income source (i.e., self-employment, benefit payments, etc.), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional Source: \_\_\_\_\_ Amount:\$ \_\_\_\_\_ Per \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

How long have you been receiving income from this source? \_\_\_\_\_

How long do you expect this income continue? \_\_\_\_\_

Is there any reason it would stop? \_\_\_\_\_

Additional Source: \_\_\_\_\_ Amount:\$ \_\_\_\_\_ Per \_\_\_\_\_

Contact person: \_\_\_\_\_ Phone: \_\_\_\_\_

How long have you been receiving income from this source? \_\_\_\_\_

How long do you expect this income continue? \_\_\_\_\_

Is there any reason it would stop? \_\_\_\_\_

**ASSETS / CREDITS / LOANS**

Number of vehicles on property? \_\_\_\_\_ Valid registration & inspection? \_\_\_\_\_

Do Vehicle 1-make/model/color/year \_\_\_\_\_

Please note, only cars on application are authorized to be on premises.

Plate number \_\_\_\_\_

Financed through \_\_\_\_\_

Contact and phone number \_\_\_\_\_

Acct. # \_\_\_\_\_ Monthly payment \_\_\_\_\_

Vehicle 2-make/model/color/year \_\_\_\_\_

Please note, only cars on application are authorized to be on premises.

Plate number \_\_\_\_\_

Financed through \_\_\_\_\_

Contact and phone number \_\_\_\_\_

Acct. # \_\_\_\_\_ Monthly payment \_\_\_\_\_

**CREDIT CARDS, LOANS** (including banks, department store, gas cards, student loans)

Creditor: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Acct. #: \_\_\_\_\_

Total Amount owed: \_\_\_\_\_ Monthly payment: \_\_\_\_\_ Are your payments current? \_\_\_\_\_

Other Creditor: \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_ Acct. #: \_\_\_\_\_

Total Amount owed: \_\_\_\_\_ Monthly payment: \_\_\_\_\_ Are your payments current? \_\_\_\_\_

List any other current monthly expenses?

Hospital payment \_\_\_\_\_ Health Insurance \_\_\_\_\_ Auto Insurance \_\_\_\_\_

Renter's Insurance \_\_\_\_\_ Child care \_\_\_\_\_ Tuition \_\_\_\_\_

Cable TV \_\_\_\_\_ Other \_\_\_\_\_ Amount \_\_\_\_\_

**BANK REFERENCE**

Name of bank and branch: \_\_\_\_\_ Phone: \_\_\_\_\_  
Branch address: \_\_\_\_\_  
Checking Acct. #: \_\_\_\_\_  
Savings Acct#: \_\_\_\_\_  
How long account active, (C) \_\_\_\_\_ (S) \_\_\_\_\_ Average monthly balance, (C) \_\_\_\_\_ (S) \_\_\_\_\_

**PERSONAL/PROFESSIONAL REFERENCES**

Character/Personal reference:  
Name \_\_\_\_\_ Time known: \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Relationship? \_\_\_\_\_  
How long? \_\_\_\_\_ Phone \_\_\_\_\_

Professional reference (i.e. attorney, accountant):  
Name \_\_\_\_\_ Time known: \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Relationship? \_\_\_\_\_  
How long? \_\_\_\_\_ Phone \_\_\_\_\_

Name of Nearest Living Relative:  
Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Relationship? \_\_\_\_\_ How long? \_\_\_\_\_ Phone \_\_\_\_\_

Name of Doctor or Health Care Provider:  
Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_  
Relationship? \_\_\_\_\_ How long? \_\_\_\_\_ Phone \_\_\_\_\_

**Guarantor Information:**

Guarantor Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Relationship to applicant: \_\_\_\_\_ Years Known: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_ Work phone: \_\_\_\_\_  
Fax: \_\_\_\_\_ Email: \_\_\_\_\_  
Employer: \_\_\_\_\_ How long with present employer? \_\_\_\_\_  
Address: \_\_\_\_\_  
City \_\_\_\_\_  
Position/Title: \_\_\_\_\_ Supervisor : \_\_\_\_\_  
Phone: \_\_\_\_\_ Annual Income \_\_\_\_\_

Do you give owner or manager permission to contact references listed above both now and in the future for rental consideration or for collection purposes should they be deemed necessary? \_\_\_\_\_

If Management has a question regarding this application, please furnish the best contact phone number:  
Day phone/contact person: \_\_\_\_\_  
Night phone/contact person: \_\_\_\_\_

**THANK YOU!**

Thank you for completing an application to rent from us. Please sign below. Please note that a completed application requires submission of the following which will be copied and attached to this application:

- Driver's License. Note: rentals will not be shown without picture ID
- Personal check (to verify bank)  2 weeks of most current pay stubs of each income source listed
- If self-employed, most current income tax and proof of current income

A fee of P \_\_\_\_\_ is charged on all rental applicants for the purpose of verifying the information furnished on this application. By signing below, applicant hereby represents all information on this application is true, complete, and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is refundable / nonrefundable / or only refundable if applicant meets our minimal criteria but is not selected because they were not the first qualified applicant.

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and misleading statements will be sufficient reason for immediate eviction and loss of security deposit.

Applicant's signature: \_\_\_\_\_  
Date: \_\_\_\_\_