

# Birchwood Properties Rental Application

## CREDIT RENTAL APPLICATION

(Each co-resident must submit a separate application)

Date \_\_\_\_\_  
 Property Name \_\_\_\_\_  
 Address Requested \_\_\_\_\_

(Office Use Only)

Unit assigned \_\_\_\_\_ Date of Lease \_\_\_\_\_  
 Amt. Deposit Rec'd \_\_\_\_\_ Rating \_\_\_\_\_  
 Date Deposit Rec'd \_\_\_\_\_ Priority \_\_\_\_\_  
 Date of Occupancy \_\_\_\_\_

**ABBS 2/98**

Name \_\_\_\_\_  
(First) (Middle) (Last)

Social Security Number \_\_\_\_\_ Drivers License Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Spouse/Roommate Name \_\_\_\_\_  
(First) (Middle) (Last)

Social Security Number \_\_\_\_\_ Drivers License Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Present Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Owner/Manager \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Owner/Manager \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Current Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Previous Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Spouse's Employer \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

Position \_\_\_\_\_ Salary \_\_\_\_\_ Supervisor's Name \_\_\_\_\_ Phone \_\_\_\_\_ Years \_\_\_\_\_

In Case of Emergency notify:

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Residence desired \_\_\_\_\_ Date of Occupancy \_\_\_\_\_ Minimum occupancy expected \_\_\_\_\_  
(Number of Bedrooms)

Have you ever broken a lease or been evicted from any type of housing? \_\_\_\_\_ If so explain: (you may use space on page 2 for more space) \_\_\_\_\_

Names of other occupants (all persons to occupy the premises must be listed).

Name _____	Relationship _____	Age _____	Name _____	Relationship _____	Age _____
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Name _____	Relationship _____	Age _____	Name _____	Relationship _____	Age _____
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Name _____	Relationship _____	Age _____	Name _____	Relationship _____	Age _____
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How many autos (including company cars) would you keep at this address? \_\_\_\_\_

Make \_\_\_\_\_ Color(s) \_\_\_\_\_ Year \_\_\_\_\_ License No. \_\_\_\_\_

Make \_\_\_\_\_ Color(s) \_\_\_\_\_ Year \_\_\_\_\_ License No. \_\_\_\_\_

**Rental Application continued on page 2, Both Pages of Application are REQUIRED.**

