



DATE OF APPLICATION \_\_\_\_\_

DESIRED DATE OF OCCUPANCY \_\_\_\_\_

UNIT SIZE \_\_\_\_\_ RENT \$ \_\_\_\_\_

**Applicant Information**

**FIRST, MIDDLE, & LAST NAME:**

Date of birth:	SSN:	Phone:
Current address:		
City:	State:	ZIP Code:
Own Rent <b>(Please circle)</b>	Monthly payment or Rent:	How Long?
Name of Current Land Owner/ Landlord:		Phone:
Previous Address:		
City:	State:	ZIP Code:
Owned Rented <b>(Please circle)</b>	Monthly payment or Rent:	How Long?

**Employment Information**

Current Employer:		
Employer Address:		How Long?
Supervisor:	Phone:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary <b>(Please circle)</b>	Monthly/Annual Income:

**Co-Applicant Information**

**FIRST, MIDDLE, & LAST NAME:**

Date of birth:	SSN:	Phone:
Current Address:		
City:	State:	ZIP Code:
Own Rent <b>(Please circle)</b>	Monthly payment or Rent:	How Long?
Previous address:		
City:	State:	ZIP Code:
Owned Rented <b>(Please circle)</b>	Monthly payment or Rent:	How Long?

**Co-Applicant Employment Information**

Current Employer:		
Employer Address:		How Long?
Supervisor:	Phone:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary <b>(Please circle)</b>	Monthly/Annual Income:

**Emergency Contact**

Name of a person <b>not</b> residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			



ADULTS \_\_\_\_\_ CHILDREN \_\_\_\_\_

APT NO. \_\_\_\_\_ PET FEE \_\_\_\_\_

<b>(2) TWO Personal References</b>			
<b>Name</b>	<b>Address</b>	<b>Phone</b>	
<b>Names of ALL OTHER Occupants</b>			
<b>Name</b>	<b>SSN</b>	<b>DOB</b>	<b>Relation to Applicant</b>
<b>Vehicle Information</b>			
<b>Make/Model</b>	<b>Year</b>	<b>Color</b>	<b>Tag # and State</b>
<b>How did you hear about us?</b> _____			
<b>Have/Are you or anyone in your household:</b>			

Leased an apartment here? \_\_\_ Yes \_\_\_ No (If yes, when? \_\_\_\_\_ Apartment #? \_\_\_\_)

Have you ever been evicted or asked to move out from any residence? \_\_\_ Yes \_\_\_ No

Have you ever broken a rental agreement or lease? \_\_\_ Yes \_\_\_ No

Been sued for non-payment of rent? \_\_\_ Yes \_\_\_ No

Been sued for damage to rental property? \_\_\_ Yes \_\_\_ No

On Probation/Parole? (Circle which one) City & State? \_\_\_\_\_ Date? \_\_\_\_\_

Been convicted of a violent or drug related crime? \_\_\_ Yes \_\_\_ No

Been charged/convicted of a felony? \_\_\_ Yes \_\_\_ No (City & State? \_\_\_\_\_ Date? \_\_\_\_\_)

Do you intend to register a pet with Lamar Apartments? \_\_\_ Yes \_\_\_ No

I certify that all information given is true and correct. I authorize the verification of any or all information provided on this form. Any verification received will be added to my tenant file. I have received a copy of this application.	
<b>Applicant's Signature</b>	<b>Date</b>
<b>Co-Applicant's Signature</b>	<b>Date</b>