

Zimmerman & Associates

Property Management Specialist

RENTAL APPLICATION AND RECEIPT FOR SECURITY DEPOSIT

Non-refundable Application processing fee: \$40/per person \$65/ per couple

Upon approval, I understand that I need to provide \$500.00 holding deposit (certified funds) immediately. This holding deposit shall become part of the security deposit.

Sign _____ Date: _____

RENTAL APPLICATION AND RECEIPT FOR SECURITY DEPOSIT

Property: _____

Proposed start date for lease: _____

Name of Applicant: _____ Date of Birth: _____

Social Security Number: _____ Driver's License: _____

Name of Spouse/2nd Applicant: _____ Date of Birth: _____

Social Security Number: _____ Driver's License: _____

Children's names and ages: _____

Names of other occupants: _____ Relationship: _____

Do you have a pet? _____ If so what kind: _____

Present address: _____ Phone: _____

City, State and Zip: _____ Cell Phone: _____

Email: _____

Amount of rent: _____ How long: _____

Managers Name: _____ Managers Phone: _____

Previous Residence:

Complete Address: _____

Amount of rent: _____ How long: _____

Managers Name: _____ Managers Phone: _____

Employment information:

Employer: _____ Manager: _____

Address: _____ Phone: _____

Monthly salary: _____ How Long: _____

Re: Spouse/2nd applicant:

Employer: _____ Manager: _____

Address: _____ Phone: _____

Monthly salary: _____ How Long: _____

Financial information:

Are there any outstanding judgments against any resident? _____

Car payment to: _____ Balance: _____ Payment: _____

Car payment to: _____ Balance: _____ Payment: _____

Automobiles:

Make: _____ Year: _____ Color: _____ Model: _____ License: _____

Make: _____ Year: _____ Color: _____ Model: _____ License: _____

Personal References: _____

In case of emergency notify: _____

Address: _____ Phone: _____

Relationship: _____

I understand that if I do not live up to the terms of the lease or fail to pay the rent, information may be turned over to a credit reporting agency, Only those listed above will occupy the premises. I understand that an incomplete application will not be processed.

Applicant Signature: _____ Date: _____

Applicant Signature: _____ Date: _____

AUTHORIZATION FOR RELEASE OF INFORMATION

I\We hereby authorize all persons or entities listed on the Rental Application for _____ to release any information in their possession known to them, concerning me. A copy of this application shall serve as the authority for the release of any said information. I\We further authorize VeriRent, LLC., its employees and agents to make such inquires as may be deemed necessary for action and determination upon this application. I\We hereby release all parties from any liability in connection with the provision and use of such information. I\We understand that this application does not constitute any oral or written commitment on the part of the owner\agent. I\We have not provided false information to obtain residency with your company.

APPLICANT

APPLICANT