

Date: _____ **BRIGHTON MANOR APARTMENTS**
RENTAL APPLICATION

Thank you for your interest in Brighton Manor Apartments. The following information is sought to qualify for residency. We require a two-year rental history and two-year work history. If you need more space, please write on the reverse side of this page.

Applicant's full name _____ Present telephone _____
Present street address _____ City _____ State _____ Zip _____
Apartment Name _____ Apt # _____ Length of tenancy _____
Name of apartment owner or manager _____ Telephone No. _____

Previous street address _____ City _____ State _____ Zip _____
Apartment Name _____ Apt # _____ Length of tenancy _____
Name of apartment owner or manager _____ Telephone No. _____

Applicant:

Marital Status: Single _____ Married _____ Divorced _____ Separated _____
Height: _____ Weight _____ Eye Color _____ Hair Color _____
Social Security No: _____ DOB _____ Driver's License # _____ State _____

Present Employer: _____ Address _____
City/State: _____ Position: _____ How long? _____
Work phone: _____ Monthly income is over: _____
Supervisor's Name: _____ Supervisor Phone: _____

Previous Employer: _____ Address _____
City/State: _____ Position: _____ How long? _____
Work phone: _____ Monthly income is over: _____
Supervisor's Name: _____ Supervisor Phone: _____

Spouse's full name: _____ Social Security No. _____ DOB _____
Driver's License No. _____ State _____
Present employer _____ Address: _____
City/State: _____ Position: _____ How long? _____
Work Phone: _____ Monthly income is over: _____ Supervisor's Name _____
Height: _____ Weight: _____ Eye Color: _____ Hair Color: _____

List name, age, and relationship of all persons to be occupying the premises
(including children, relatives, etc..)

Name: _____	Age: _____	Relationship: _____
Name: _____	Age: _____	Relationship: _____
Name: _____	Age: _____	Relationship: _____
Name: _____	Age: _____	Relationship: _____
Name: _____	Age: _____	Relationship: _____

List all vehicles to be parked on the premises by applicant, spouse, or children:

Type: _____	Year: _____	License No. _____	State: _____
Type: _____	Year: _____	License No. _____	State: _____

Why are you leaving your present residence? _____
Have you or your spouse ever been evicted? _____
Have you or your spouse ever broken a rental agreement or lease contract? _____
Have you or your spouse ever been sued for non-payment of rent or damages to rental property? _____
Have you ever declared bankruptcy? _____ Year: _____
Have you or your spouse ever been convicted of a felony? _____

APT# _____ CORRECT INFORMATION MOVE-IN-DATE _____

The undersigned persons represent that all the above statements are true and correct and hereby authorize verification of such information and to run a credit report. False information given above shall entitle owner to (1) reject this application, (2) retain the application fee(s) deposit(s) as liquidated damages for owner's time and expense of processing this application, and (3) terminate resident's right of occupancy. Should application be approved and applicant changes their mind about moving into the apartment on agreed date, deposit will be forfeited.

Signature

Signature of Applicant's Spouse