



Rental Application

Please print clearly & legibly

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FOR PROPERTY LOCATED AT			FLOOR	UNIT NUMBER	DATE OF APPLICATION	
NAME			HOME PHONE		CELL PHONE	
PRESENT ADDRESS			CITY		STATE	ZIP
SOCIAL SECURITY #			MARITAL STATUS S M D		E-MAIL ADDRESS	
DO YOU OWN? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, HOW LONG?	DO YOU RENT? <input type="checkbox"/> YES <input type="checkbox"/> NO	LENGTH OF STAY		RENTAL AMOUNT \$	<input type="checkbox"/> WITH HEAT <input type="checkbox"/> WITHOUT HEAT
CURRENT LANDLORD'S NAME				PHONE		
CURRENT LANDLORD'S ADDRESS			CITY		STATE	ZIP
YOUR FORMER ADDRESS					HOW LONG THERE?	
FORMER LANDLORD'S NAME				PHONE		
FORMER LANDLORD'S ADDRESS			CITY		STATE	ZIP
YOUR OCCUPATION		SALARY \$ PER		LENGTH OF EMPLOYMENT	WORK PHONE	
EMPLOYER (NAME)				SUPERVISOR		
EMPLOYER ADDRESS			CITY		STATE	ZIP
HAVE YOU EVER BEEN CONVICTED OF A FELONY? <input type="checkbox"/> Y <input type="checkbox"/> N IF YES, PLEASE DESCRIBE						
DO YOU HAVE PETS? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, PLEASE DESCRIBE		PET NAME		DO YOU SMOKE? <input type="checkbox"/> YES <input type="checkbox"/> NO	NO. OF CO-TENANTS
NAME OF CO-TENANT				RELATIONSHIP		
NAME OF CO-TENANT				RELATIONSHIP		
AUTO MAKE	BODY STYLE	COLOR		REGISTRATION NO.	STATE	
DESIRED RENTAL START DATE	DESIRED LENGTH OF LEASE					

A nonrefundable application processing fee of \$20 is due with this application. A current credit report is required for all applicants and/or co-applicants. I/we, the undersigned, do hereby authorize Drinan Properties, Inc., to make all necessary inquiries, including credit reports. The undersigned assert that all statements contained herein are truthful and accurate to the best of their knowledge, and the undersigned acknowledge that the provision of false information shall be cause to terminate any lease between the undersigned and Drinan Properties, Inc. and/or its assigns.

APPLICANT X _____ **CO-APPLICANT X** _____
(SIGNATURE) (SIGNATURE)