

RESIDENTIAL RENTAL APPLICATION

Landlord

Landlord Name: Greenglen Apartments LLC
Address: 1805 Dogwood Ridge Rd, Wheelersburg, OH 45694
Phone: 740-574-8520

Rental Property Information

Rental Property Address: 1805 Dogwood Ridge Rd
Application to rent suite # _____
Anticipated Possession Date: _____, _____
The term of the tenancy will be _____

The monthly rent will be \$ _____.
Security Deposit: _____.

Applicants' Personal Information

Applicant's Name: _____
Home Phone: () _____ Alternative Phone: () _____
Email Address (Optional): _____ Date of Birth: _____

Second Applicant's Name: _____
Second Applicant's Date of Birth: _____

Third Applicant's Name: _____
Third Applicant's Date of Birth: _____

Dependants Name(s):	Date(s) of Birth
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a pet? Yes / No If more than one, how many? _____
Please describe type(s) of pet(s): _____

Residential History

Present Address: _____
City: _____ State: _____
ZIP Code: _____ How long at this address? _____
Landlord / Lessor: _____ Phone: () _____

Previous Address 1: _____
City: _____ State: _____
ZIP Code: _____ How long at this address? _____
Landlord / Lessor: _____ Phone: (_____)

Previous Address 2: _____
City: _____ State: _____
ZIP Code: _____ How long at this address? _____
Landlord / Lessor: _____ Phone: (_____)

Details of Employment

Employer: _____
Position: _____ Date Hired: _____
Supervisor's Name: _____ Phone: (_____)
Salary: _____

(If employed less than one year with present employer, please provide previous employer.)

Previous Employer: _____
Position: _____ Date Hired: _____
Supervisor's Name: _____ Phone: (_____)
Salary: _____

Other Sources of Income

Do you receive income from any of the following sources? Yes / No
Student Loans _____ Pension Benefits _____ Social Assistance _____ Other _____
Please provide contact persons who could verify the amount of income you receive:

Vehicle Information

Make / Model: _____ Year: _____
License Plate Number: _____ Driver's License Number: _____
Make / Model: _____ Year: _____
License Plate Number: _____ Driver's License Number: _____

Parking stall required? Yes / No Additional stall required? Yes / No (Subject to availability)

Banking Information

Banking Institution: _____
Address: _____
Phone: (_____)

(If you bank with more than one institution, please list second bank below)

Banking Institution: _____

Address: _____

Phone: () _____

References

Name: _____ Phone: () _____

Name: _____ Phone: () _____

Emergency Contact

Name: _____

Relationship: _____ Phone: () _____

Criminal & Credit Background Check Authorization

Is there anything negative that we may find in our criminal or credit background check that you want to comment on?

I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature _____ Date _____