

Rental Application

Please complete the following application and return it to **The Leasing Office 4641 W. 6th St, Lawrence, KS 66049**. All items must be completed in order to determine your eligibility. **Incomplete applications will be returned**. If an item does not apply to you, please mark "N/A" on that line. Every applicant will be required to go through a formal interview before eligibility is determined.

A. General Information - Please circle one: MR. MRS. MS. MISS

App ID: _____
 Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____

Daytime Telephone Number: _____ E-Mail Address: _____

Property Name:

Unit Size: **1BR 2BR 3BR 4BR** List Desired Apt. Number (1st, 2nd, 3rd Choice): _____

B. Household Composition – List all persons, including yourself, who will be living in the apartment.

Name (List Head of Household first)	Relationship	Drivers License	Birth Date	Social Security Number
1.	Head of Household			- -
2.				- -
3.				- -
4.				- -
5.				- -
6.				- -

C. Income – All sources of regularly received monies must be listed regardless of recipient's age.

Family Member Name	Sources of Income	Amount
	<i>Wages – Gross Monthly Amount</i> Employer Name:	\$
	<i>Wages – Gross Monthly Amount</i> Employer Name:	\$
	Social Security/Pension – Gross Monthly Amount	\$
	Child Support/Alimony - Monthly Amount	\$
	Interest Income - Gross Monthly Amount (i.e., interest earned from bank accounts, CD's, stocks, bonds, etc.)	\$
	Other Monthly Income	\$

