

How did you hear about us? Newspaper Website Word of Mouth Resident Referral - by whom _____

IMPERIAL PROPERTY MANAGEMENT

Bethlehem Plaza Homes Fairview Heights

BEDROOM SIZE 1 2 3 4 (Heights Only)

APPLICATION FEE- \$25 Application Fee per Adult

1. NAME _____ DRIVER'S LICENSE# _____
 (First) (Middle) (Last) (State & #)

PRESENT ADDRESS _____
 (City) (State) (Zip)

How long at this address: _____

PREVIOUS ADDRESS _____
 (Complete if resided at present address for less than 3 years) (City) (State) (Zip)

HOME # _____ WORK # _____

2. List **ALL** persons who will be living in the household (if additional spaces are needed use separate sheet.)

All MEMBER INFORMATION MUST BE FULLY COMPLETED OR APPLICATION MAY BE REJECTED.

NAME	RELATIONSHIP	SEX	RACE	BIRTH DATE	AGE	SOC. SEC. NO.	BIRTH CITY,STATE
	HEAD OF HOUSEHOLD						

3. List **ALL** income in the home (if additional space is needed use separate sheet).

NAME OF HOUSEHOLD	EMPLOYER/SOURCE OF	MONTHLY	WEEKLY	HOURLY	# OF HOURS

4. PRESENT ADDRESS

Name of Landlord: _____ Address: _____

Phone: _____ Monthly Payment: _____ Dates: _____

5. PREVIOUS ADDRESS (complete if resided in present address less than 3 years)

Name of Landlord: _____ Address: _____

Phone: _____ Monthly Payment: _____ Dates: _____

6. EMPLOYMENT

Name of employer: _____ Address: _____ Phone: _____

7. Are you employed by the Housing Authority or related to anyone employed by the Housing Authority or any of its instrumentalities? Related is defined as (Parent and child, brothers and sisters, grandparents and grandchild, aunt and/or uncle and niece and/or nephew, stepbrothers and stepsisters, husband and wife, parents-in-law and children-in-law, brothers-in-law and sisters-in-law and "related" includes anyone with a significant intimate relationship, including but not limited to parents and children, etc.) Yes _____ No _____ If yes, who? _____

8. Section 8/HCV Participant

Do you have a Section 8 Certificate or Voucher? _____ Yes _____ No

9. **PETS:** Keeping of an assistance animal requires consent of management, and execution of Pet Addendum. Handicapped assistance animals used for disabilities are not considered pets.

10. In case of an emergency, whom may we contact: Name: _____
 Telephone: _____
 Relationship: _____

I have read the above statement and the above information is correct to the best of my knowledge. I have no objection to inquiries for verifying the facts herein stated.

I authorize Imperial Property Management Services to use a third party background-checking company to obtain my credit and rental history and perform a criminal record search. I understand that the information obtained is to be used only in the processing of my rental application. I hereby release and hold harmless any third party background checking company who have provided information from any and all liabilities arising out of the use of such information in connection with my credit history and criminal record search.

SIGNATURE OF APPLICANT _____ DATE _____

REVIEWED BY: _____ DATE _____ ELIGIBLE ____ INELIGIBLE _____

NOTES: