

MONROE TERRACE APARTMENTS RENTAL APPLICATION

FAX: 636-573-1564; EMAIL: deslogeapartments@gmail.com MAIL: PO Box 1712, Desloge, MO 63601-5012
www.deslogeapartments.net

I am interested in a: one bedroom apartment two bedroom apartment.

I wish to move in on this date: _____

PLEASE TELL US ABOUT YOURSELF

Full Name _____ Phone _____

Date of Birth _____ Social Security # _____

Email Address : _____ (Other Phone) _____

Co-Applicant Name _____

Names & Ages of Dependents _____

Co-Applicant Date of Birth _____ Social Security # _____

List All Pets
(Type, Breed, Weight & Age)

List name, age, and relationship to anyone else who will stay in the apartment:

PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)

Current Address _____ Apt# _____ City _____

State _____ Zip _____ Month/Year Moved In _____

Reasons for moving _____

Rent \$ _____ Owner _____ Phone _____

Previous Address _____ Apt# _____ City _____

State _____ Zip _____ Month/Year Moved In _____

Reasons for moving _____

Rent \$ _____ Owner _____ Phone _____

Previous Address _____ Apt# _____ City _____

State _____ Zip _____ Month/Year Moved In _____

Reasons for moving _____

Rent \$ _____ Owner _____ Phone _____

PLEASE DESCRIBE YOUR CREDIT HISTORY

Have you ever been evicted from a rental residence? Yes _____ No _____
Have you had two or more late rental payments in the past year? Yes _____ No _____
Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

PLEASE PROVIDE YOUR EMPLOYMENT INFORMATION

Your Status: _____ Full Time _____ Part Time _____ Student _____ Unemployed
Employer _____
Dates employed _____ Job Title _____
Supervisor Name _____ Phone _____
Salary \$ _____ per _____. (If employed by above less than 12 months, give name & phone of previous employer or school: _____
_____.

If you have other sources of income that you would like us to consider, please list income, source, and person (banker, employer, etc.) who we may contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount \$ _____ Source/Contact Name _____

PLEASE LIST YOUR REFERENCES

Personal Reference:

Name _____ Phone _____

Name _____ Phone _____

Emergency Contact:

Name _____ Address _____

Phone _____ Relationship _____

Driver's License:

Your Driver's License Number _____ State _____

Vehicle Information:

Make / Model _____ Year _____ License Plate State _____

ADDITIONAL INFORMATION:

Please give any additional information that might help owner/management evaluate this application?

Where may we reach you to discuss this application?

Day Phone # _____ Night Phone # _____

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application. I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

. I recognize that as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

The above information, to the best of my knowledge, is true and correct.

Please sign: X _____
Name of Applicant Date

**AUTHORIZATION
Release of Information**

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

Name (please print)

X _____
Signature Date