

# BRIKEN AND ASSOCIATES

4809 Inles Rd. LAKE CHARLES, LA. 70605  
(337)439-6030 Fax(337)436-6432

MOVE-IN DATE \_\_\_\_\_ LEASE TERM \_\_\_\_\_

RENT AMOUNT \_\_\_\_\_ RENT STARTS \_\_\_\_\_

PRORATED RENT \_\_\_\_\_ RECEIVED DATE \_\_\_\_\_ TIME \_\_\_\_\_

## APPLICATION FOR RENTAL PROPERTY:

LAST NAME OF APPLICANT \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ HOME PHONE# \_\_\_\_\_ CELL# \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

LANDLORD/LENDOR \_\_\_\_\_ RENT/MORTGAGE \$ \_\_\_\_\_ PHONE# \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_ SALARY \_\_\_\_\_  
POSITION \_\_\_\_\_ PHONE \_\_\_\_\_ SUPERVISOR \_\_\_\_\_ YEARS \_\_\_\_\_

PREVIOUS EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_ SALARY \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS \_\_\_\_\_

SPOUSE / CO-APPLICANT  
LAST NAME \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ HOME PHONE# \_\_\_\_\_ CELL# \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

PRESENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_

LANDLORD/LENDOR \_\_\_\_\_ RENT/MORTGAGE \$ \_\_\_\_\_ PHONE# \_\_\_\_\_

PRESENT EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_  
PHONE \_\_\_\_\_ SALARY \_\_\_\_\_ POSITION \_\_\_\_\_ YEARS \_\_\_\_\_

HAVE YOU EVER RECEIVED A REQUEST TO VACATE, EVICTED, OR BROKE A LEASE FROM ANY PROPERTY? IF YES, EXPLAIN \_\_\_\_\_

\*IF YOU HAVE NO SALARY, FROM WHAT SOURCE WILL YOU PAY RENT? \_\_\_\_\_

PET(S) \_\_\_\_\_ BREED(S) \_\_\_\_\_ WEIGHT \_\_\_\_\_

### OTHER PERSON WHO WILL OCCUPY THIS PROPERTY WITH YOU:

NAME _____	RELATIONSHIP _____	AGE _____	SEX _____
NAME _____	RELATIONSHIP _____	AGE _____	SEX _____
NAME _____	RELATIONSHIP _____	AGE _____	SEX _____
NAME _____	RELATIONSHIP _____	AGE _____	SEX _____

IN CASE OF EMERGENCY, NOTIFY : NAME \_\_\_\_\_ PHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

### HOW MANY AUTO, BOATS, OR TRAILERS WOULD YOU KEEP AT THIS ADDRESS?

MAKE OF AUTO _____	YEAR _____	COLOR _____	LICENSE _____
MAKE OF AUTO _____	YEAR _____	COLOR _____	LICENSE _____
MAKE OF AUTO _____	YEAR _____	COLOR _____	LICENSE _____

**\*\*PLEASE SUBMIT A COPY OF YOUR DRIVER'S LICENSE\*\***

**IN THE EVENT THE APPLICATION IS PROCESSED AND APPLICANTS FAIL OR REFUSE TO PROVIDE THE NECESSARY INFORMATION OR FAIL TO ENTER INTO THE CONTEMPLATED LEASE, OWNER SHALL RETAIN THE SAID DEPOSIT AS HOLDING LIQUIDATED DAMAGES TO COVER THE COST OF TAKING AND PROCESSING THIS APPLICATION AND REMOVING THE PROPERTY FROM THE MARKET. IN THE EVENT THIS APPLICATION IS NOT APPROVED, OR FOR ANY OTHER REASON FOR WHICH THE OWNER IS RESPONSIBLE AND THE LEASE AGREEMENT IS NOT CONSUMMATED, THIS DEPOSIT WILL BE RETURNED TO APPLICANT.**

Applicant has deposited herewith the sum of \$ \_\_\_\_\_, receipt of which is hereby acknowledged as a non-interest bearing deposit (and not as a rental payment) to be refunded as hereinafter provided in the lease agreement.

The applicant (and co-applicant, if any) hereby acknowledges and agrees that this is a lease application only and is subject to approval by management. The applicant (and co-applicant, if any) hereby certifies that the information contained in the lease application is true and correct. Applicant (and co-applicant, if any) has no objection to inquiries for the purpose of verification of the above.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SPOUSE / CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_