

TENANT APPLICATION

1703 N Bishop, Rolla, MO 65401 573-364-4050

473 Old Route 66, St. Robert, MO 65584 573-336-3535

Fee: \$75 for Each Application 473 Old Rou (Must be Complete) A Separate Application is Required From Each Proposed Adult Occupant

Showing Agent:	This Application is Valid for 30 Days					E	Email: rentals@inv-rel.com		
Property Address Being Applied fo	r:								
Name:			Social Security #:						
Home Phone #:			Work Phone #:						
Student:			Cell Phone #:						
American Citizen: Yes No			Student ID#:						
Total # of Occupants That Will Reside in Unit:			Passport #:						
Driver's License #/State:			Email Address:						
Vehicle Make/Model/License Plate #:			Current Monthly Income:						
Preferred Contact Method: Em	nail 🗌 Yes [☐ No Text	☐ Yes ☐	No P	hone 🗌	Yes	☐ No		
Address City/State/Zip Owner/Mgmt Co. Phone # From / To Rent									
Current:									
Previous:									
Next Previous:									
Reason for Leaving Current Address:									
Employer	Addr	ess/City/State	/Zip	one #	Sı	upervisor	How Long		
Current:									
Previous:									
Emergency Contact Address/Cit		//State/Zip	Phone #		#	Relationship			
Name:									
Name:									
Have you rented from Investment Realty, Inc. before? ☐ Yes ☐ No									
If yes, where? When?									
Have you ever been evicted?									
Have you ever been charged with a felony? Yes No If Yes, explain:									
Will any pets be at this residence?									
Pet Approved:	No Date		Agen	t					
WE DO BUSINESS IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING LAW and do not discriminate against any person because of race, color, religion, ancestry, sex, handicap, familial status, national origin, or any other trait protected by law.									
BY SIGNING, I AUTHORIZE MY PROSPECTIVE LANDLORD AND/OR ITS AGENTS TO: Check my credit history, seek information from current and prior landlords and/or employers and any other information deemed pertinent. I certify that I am over 18 years of age. In order to be considered for tenancy, this application must be completed and signed. I certify that all of the foregoing information is true and accurate to the best of my knowledge and belief. I understand that any omission or falsification will be grounds for rejection of my application or, in the event that I am approved for tenancy, termination of my lease agreement.									
Signature:				Date:					
Approved:	o Date		Agen	t					