

# Rental Application



P.O. Box 8187  
St. Joseph, MO 64508

Name (first, middle, last): \_\_\_\_\_

Cell Phone # \_\_\_\_\_ E-mail: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Current Landlord Phone # \_\_\_\_\_

Current Rental Complex Name: \_\_\_\_\_

Current Rental Start & End Dates: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver License or ID: State \_\_\_\_\_ License or ID number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Have you applied with us before Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when? \_\_\_\_\_

Current Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ How long have you worked? \_\_\_\_\_

Current Salary/Wages: \_\_\_\_\_ How many hours per week? \_\_\_\_\_

Previous Employer if employed less than 1 year: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ How long were you employed? \_\_\_\_\_

Please furnish us with the following information regarding your rental history for **the last five (5) years**. If you need additional space, please use the back side of this form:

Landlord/Apartment Complex: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ to \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Reason for leaving:  
\_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Landlord/Apartment Complex: \_\_\_\_\_

Address: \_\_\_\_\_

From: \_\_\_\_\_ to \_\_\_\_\_ Rent Paid: \_\_\_\_\_

Reason for leaving:  
\_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Please list children who will be living with you:  
\_\_\_\_\_

Have you ever been convicted of any felony, domestic assault, or any misdemeanor assault?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Are you currently a registered sex offender in any jurisdiction or an absconder of a sex offender registry? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of any drug offenses in any jurisdiction? This includes but is not limited to misdemeanors such as drug paraphernalia. Yes \_\_\_\_\_ No \_\_\_\_\_

Have you been convicted of DUI, DWI, or minor in possession of alcohol in any jurisdiction?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever had a judgment against you for damages to an apartment or rental property?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Do you hold or have a medical marijuana card? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been evicted or had an eviction action from an apartment or rental property?  
Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever willfully not paid rent on time? Yes \_\_\_\_\_ No \_\_\_\_\_

If currently renting, have you given proper notice to your current landlord? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you a full time college student (taking more than 6 hours of classes)? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever had or do you currently have a bed bug infestation? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you smoke? Yes \_\_\_\_\_ No \_\_\_\_\_ Cat? Yes \_\_\_\_\_ No \_\_\_\_\_ # of Cats \_\_\_\_\_

Dog? Yes \_\_\_\_\_ No \_\_\_\_\_ Weight \_\_\_\_\_ Breed \_\_\_\_\_ Neutered \_\_\_\_\_

City License # \_\_\_\_\_ Vet \_\_\_\_\_

If you are military please list branch and pay grade \_\_\_\_\_

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Please list all sources of **verifiable** income with amounts:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please list 3 references not related to you and not living with you:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Who will be your room mate? \_\_\_\_\_

*This includes individuals who will have access to your apartment for any reason while you are not present & regardless if they have a key to the apartment. Maximum one adult roommate.*

Please submit your application with copies of your pay stubs and verifiable sources of income. We also need a photocopy of your driver license.

**Incomplete applications will not be considered.**

**Authorization to Release and Obtain Credit Information**

I authorize the verification of the information provided on this form as to my credit and employment. I attest that the answers I have stated herein are true and complete to the best of my knowledge. I understand that false or misleading information provided herein OR incomplete applications will result in the immediate disqualification of this application.

I further attest that I am not a fugitive from justice, absconder of any sex offender registry, and that I do not engage in any illegal activity such as drug dealing/use, prostitution, or human trafficking.

Additionally, I authorize G.T. Woods Property Management and its agents to supply my rental history and record, at their sole discretion, in whole or part, to any prospective landlord, financial institution, government agency, or other party with an interest that the Company deems appropriate.

The undersigned hereby gives G.T. Woods Property Management and the Landlord the right to inquire into or request information in regard to references, creditors, former landlords, past or present employers, and criminal/civil background information. Upon locating and applying for a lease for a property, the undersigned authorizes G.T. Woods Property Management and the Landlord the right to order and/or obtain my credit report from any credit bureau or credit check company.

A \$30.00 non-refundable application fee is required for prospective tenants.

Applicant printed name: \_\_\_\_\_

Applicant signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Car/Truck Information for Parking**

Vehicle #1:

Make: \_\_\_\_\_

Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate # \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

Vehicle #2:

Make: \_\_\_\_\_

Model: \_\_\_\_\_ Color: \_\_\_\_\_

License Plate # \_\_\_\_\_ State \_\_\_\_\_ Expires \_\_\_\_\_

Parking Permit Vehicle #1: \_\_\_\_\_

Parking Permit Vehicle #2: \_\_\_\_\_

**Maximum of 2 vehicles per unit, including motorcycles or recreational vehicles.**

Your parking permit will be issued to you at no charge upon approval. If you lose your permit a new one may be issued for a \$10.00 fee.

Place your permit on your dashboard or driver side window when parked in the carports.