Apartment Application

706 Waverly Place, Whitefish, MT 59937

| Apartment #: Requested | Move In Date: | - | | |
|------------------------------------|-------------------------------|-----------------------|---------------|--|
| Apartment lease is for minimum o | | | | |
| Security Deposit of \$1275 is requ | - | | | |
| Any false information on this appl | ication will void the applica | tion. Please write | clearly. | |
| | | | · | |
| Applicant's Name: | | Birthdate:/_ | / | |
| Contact Number: | Email: | | | |
| Driver's License No. & State: | Soci | al Security No: | | |
| (Please attach a copy of the drive | | .) | | |
| Total number of Occupants: | | | | |
| | | | | |
| List all Occupants under 18. As | eparate application needs t | o be filled out for e | ach adult. | |
| Nama | |) alationship | Ago | |
| Name | | Relationship | Age | |
| | | | | |
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| | 1 | | | |
| RESIDENCE HISTORY | | | | |
| Current Address: | Fro | m: To: | Monthly Rent: | |
| | Contact Number: | | | |
| Reason for moving: | | | | |
| Previous Address: | | | Monthly Rent: | |
| Landlord name: | Contact Number: | | | |
| Reason for moving: | | | | |
| | | | | |
| EMPLOYMENT HISTORY | | | | |
| | From:To: | | | |
| | | | | |
| Position Held/Occupation: | | | | |
| Supervisor's Name: | Contact Number: | | | |
| Previous or 2nd Employment: | ment:To:To: | | | |
| Address: | | Salary:\$ | | |
| Position Held/Occupation: | | | | |
| Supervisor's Name: | Contact Number: | | | |
| | - · · · · · · | | | |
| Provide 3 non-relative (friends or | Business) References: | | | |
| | 1 | | | |
| Name | Relationship | Contact N | lumber | |
| | | | | |

| Please answer the following questions: | | | | |
|--|--|--|--|--|
| Additional Income: \$ Describe: | | | | |
| (Provide if the additional income is to be included for qualification) | | | | |
| Even been found guilty of a felony? Yes No | | | | |
| Ever been evicted? Yes No | | | | |
| Smoker? Yes No | | | | |
| Any Pets? Yes No | | | | |
| Any Service or emotional support animals? Yes No, Describe | : | | | |
| , see | · | | | |
| Will you pass a Credit Check? Yes No, Explain | | | | |
| , as produced as a second seco | | | | |
| | | | | |
| Do you own a Vacuum Cleaner? Yes No | | | | |
| Have you ever been late or delinquent on rent? Yes No | | | | |
| Have you ever been party to a lawsuit? Yes No | | | | |
| Do you have any loans? Yes (Amount:\$) No | | | | |
| Number and Type of Vehicles? | | | | |
| rvamber and Type of Venicles. | | | | |
| If yes to any of the above, please explain why | | | | |
| If yes to any of the above, please explain why | | | | |
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| Additional Comments | | | | |
| Additional Comments | | | | |
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| Access to all O. A. Albert alter | | | | |
| Agreement & Authorization | | | | |
| | | | | |
| I understand I acquire no right in an apartment until I sign an agreement in the form submitted \$50.00 on the apartment I have selected which fee is to be held in accordance with the rental ag | | | | |
| the Landlord's holding the apartment for me, I hereby waive all right to the return of the holding fee and said holding fee shall | | | | |
| be retained as liquidated damages in the event I do not choose to enter into the agreement applied for herein. In the event | | | | |
| said application for tenancy is not accepted. Fee shall be returned to applicant. | | | | |
| | | | | |
| NON-REFUNDABLE PROCESS FEE \$CHECK # | | | | |
| In compliance with the Fair Credit reporting act, we are informing you that information as to you and mode of living will be verified. I, as the prospective tenant agree that the facts set forth in complete, and that a complete investigation of all on this application will not constitute invasion Landlord or their authorized agent to obtain credit reports, bank information, employment information. | this application are true and nof privacy. I authorize the | | | |
| reports as necessary. I authorize my employer and references to release such information as r misrepresentations will be sufficient cause for dismissal of voiding of this application. False, frau information may be grounds for denial of tenancy or subsequent eviction. | | | | |
| Signature of applicant: Date: | | | | |
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(Please email this completed application back to me. If that is a problem, you can also take a picture of each page of the application and text it to me.)