

GPX

REALTY PARTNERS

Name: (Last) _____ (First) _____ (Middle) _____

Social Security Number: _____

Date of Birth: _____ Driver License No.: _____

Home phone: _____ Email address: _____

Current Address: _____

City: _____ State: _____ Zip: _____

Daytime phone: _____ Cell phone: _____

Month & year moved in: _____ Reason for leaving: _____

Landlord Name: _____ Landlord phone: _____

Monthly Rent: _____

Previous Address: (please list all previous addresses within the last 7 years.)

1. _____

2. _____

3. _____

Employment

Employment Status: Part Time _____ Full Time _____ Retired _____ Temporary _____ Gross monthly salary: _____

Title/Position: _____

Current employer: _____ Employer phone number: _____

Employer address: _____

Employment dates: _____ Supervisor: _____

Financial Reference

Bank	Location	Account Number/Type	Telephone
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1. _____

2. _____

Additional Occupants (under 18 years of age)

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Auto Information

1. Make/Model/Year: _____

2. Make/Model/Year: _____

Have you ever been sued for non-payment of rent? _____

Have you ever filed for bankruptcy? _____

Have you ever been evicted? _____

I hereby grant management the right to process this application for the purpose of obtaining a rental lease. In compliance with the Fair Credit Reporting Act, this notice is to inform you that a credit report will be obtained and additional information will be obtained through employers, banks, landlords & financial companies. Applicant hereby represents that all information is true correct & complete.

I/WE give a deposit in the amount of \$ _____ on Apartment Number: _____

In addition to \$ _____, which is the non refundable credit check fee.

The balance of the Deposit in the amount of \$ _____ is due by: _____

If balance of deposit is not received by this date, Landlord will attempt to re-rent the apartment and the Deposit shall be forfeited.

Upon execution of the Lease, the Deposit shall be included in the Security Deposit. Applicant understands, in the event Applicant cancels the Rental Application within 3 days, the Deposit shall be refunded. The credit check fee will not be refunded. Should Applicant cancel the Rental Application after the 3rd day, the Deposit will not be refunded.

Applicant Signature: _____ **Date:** _____

For office use:

Move in date: _____ Rent: _____ App Fee: _____ Apt. No.: _____

Pet Fee: Y N Required Sec. Deposit: \$ _____ LMR: _____ Leasing Agent: _____

Manager Signature: _____