



RESIDENTIAL RENTAL APPLICATION

(Each applicant to complete a separate application)

A LANDLORD HAS THE RIGHT TO ASK FOR PROOF OF A TENANT'S ABILITY TO PAY RENT AND FOR PAST RENTAL REFERENCES. BASED UPON THE REPLY TO THESE AND OTHER QUESTIONS REGARDING A TENANT'S LEVEL OF PERSONAL RESPONSIBILITY, THE LANDLORD HAS THE RIGHT TO SELECT THE TENANT(S) BEST SUITED FOR HIS OR HER UNIT.

UNIT APPLYING TO \_\_\_\_\_ Requested Move-In Date \_\_\_\_\_

1. TENANT INFORMATION

Name \_\_\_\_\_

EMAIL Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ (to be used only for Criminal Background Screening)

Drivers License No. \_\_\_\_\_

Social Security No. \_\_\_\_\_

Current Address \_\_\_\_\_

Street Number Street Address City State Postal Code

Current Phone Number \_\_\_\_\_

Permanent Address \_\_\_\_\_

Street Number Street Address City State Postal Code

Permanent Phone Number \_\_\_\_\_

2. RENTAL INFORMATION (Give the following information on the last two places of residence)

Landlords Name Phone Rental Address Dates of Tenancy Monthly Rent

(1)

(2)

3. Full names of all individuals (including children) who will be occupying premises.

4. Will you be having Pets (Specify Age/Neutered or Fixed/Type) \_\_\_\_\_

5. Have you ever been convicted of a felony or misdemeanor? \_\_\_\_\_

6. Have you ever been evicted, sued for nonpayment of rent, or breached a lease (if so, explain)?

7. Present Employer \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Occupation \_\_\_\_\_

Gross Monthly Salary \_\_\_\_\_ Length of Employment \_\_\_\_\_

8. Do you have any other sources of income (if so, explain what source and how much monthly)?

9. Are you a student (if so, where)?

10. If necessary, are you able to get a co-signer? \_\_\_\_\_

11. Were you referred to Trident by someone? Yes / No

If yes, who referred you? \_\_\_\_\_

If no, how did you find out about Trident or its properties? (Circle One) Street Sign / Word of Mouth / Google Search / Trident Website / WMU Bus Ad / Craigslist / Other \_\_\_\_\_

10. In case of emergency notify \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

11. BANKING & CREDIT INFORMATION (Bank Name, City, State, Account #)

Checking Account \_\_\_\_\_

Savings Account \_\_\_\_\_

Other Asset Account (Specify) \_\_\_\_\_

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE. I AUTHORIZE THE VERIFICATION OF THIS INFORMATION THROUGH A CREDIT REPORT AND/OR CHECKING OF THE ABOVE REFERENCES.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_