

LEASE OR PURCHASE APPLICATION

(All blanks must be completed. Attach copies of current pay stubs, bank statements and other helpful documentation. Do not omit any information.)

FULL LEGAL NAME(S) _____

FULL LEGAL NAME(S) _____

HOME PHONE _____ CELL _____ EMAIL _____

MARITAL STATUS: S _____ M _____ (How Long _____) D _____

PRESENT ADDRESS _____

CITY _____ STATE _____ ZIP _____ HOW LONG AT PRESENT ADDRESS _____

PRESENT RENT \$ _____ LANDLORD _____ LANDLORD # _____

WHAT KIND OF RECOMMENDATION WILL LANDLORD PROVIDE? _____

PREVIOUS ADDRESS _____

CITY _____ STATE _____ ZIP _____ HOW LONG AT PREVIOUS ADDRESS _____

PREVIOUS RENT \$ _____ LANDLORD _____ LANDLORD # _____

WHAT KIND OF RECOMMENDATION WILL PREVIOUS LANDLORD PROVIDE? _____

LIST ALL PERSONS WHO WILL OCCUPY THE PREMISES INCLUDING YOU:

NAME	RELATIONSHIP	BIRTHDAY	SS#
_____	self	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

DO YOU HAVE MAJOR MEDICAL INSURANCE? Y _____ N _____

NAME OF MEDICAL COMPANY _____ POLICY # _____

MEDICAL CO. PHONE # _____

DO YOU HAVE LIFE INSURANCE? Y _____ N _____ AMOUNT \$ _____

NAME OF INS. COMPANY _____ POLICY # _____

INS. CO. PHONE # _____ AGENT _____

DESCRIBE ANY PETS THAT YOU PLAN ON KEEPING ON THE PREMISES: _____

DO ANY FAMILY MEMBERS SMOKE? Y _____ N _____ WHO _____

HAS ANY FAMILY MEMBER EVER BEEN CHARGED WITH A CRIME? Y _____ N _____ EXPLAIN: _____

ARE YOU A VETERAN? Y _____ N _____

DRIVERS LICENSE NUMBER _____ CO-APPLICANT'S _____

PRESENT EMPLOYER _____ POSITION _____

EMPLOYER'S ADDRESS _____ CITY _____

STATE _____ ZIP _____ EMPLOYER'S PHONE _____

EMPLOYED FROM _____ TO _____

SUPERVISOR'S NAME _____ SUPERVISOR'S PHONE _____

PRESENT GROSS PER MONTH _____ EXPECT PERIODIC RAISES? Y _____ N _____

PREVIOUS EMPLOYER _____ POSITION _____

EMPLOYER'S ADDRESS _____ CITY _____

STATE _____ ZIP _____ EMPLOYER'S PHONE _____

EMPLOYED FROM _____ TO _____

SUPERVISOR'S NAME _____ SUPERVISOR'S PHONE _____

LIST AND EXPLAIN ANY UNEMPLOYMENT IN LAST 7 YEARS _____

CO-APPLICANT'S PRESENT EMPLOYER _____ POSITION _____

EMPLOYER'S ADDRESS _____ CITY _____

STATE _____ ZIP _____ EMPLOYER'S PHONE _____

EMPLOYED FROM _____ TO _____

SUPERVISOR'S NAME _____ SUPERVISOR'S PHONE _____

PRESENT GROSS INCOME PER MONTH _____ EXPECT PERIODIC RAISES? Y _____ N _____

CO-APPLICANT'S PREVIOUS EMPLOYER _____ POSITION _____

EMPLOYER'S ADDRESS _____ CITY _____

STATE _____ ZIP _____ EMPLOYER'S PHONE _____

EMPLOYED FROM _____ TO _____

SUPERVISOR'S NAME _____ SUPERVISOR'S PHONE _____

LIST AND EXPLAIN ANY EMPLOYMENT IN LAST 7 YEARS _____

CHECKING ACCOUNTS: (Include all parties)

BANK _____ ACCOUNT # _____ BALANCE \$ _____

BANK _____ ACCOUNT # _____ BALANCE \$ _____

SAVINGS ACCOUNTS: (Include all parties)

BANK _____ ACCOUNT # _____ BALANCE \$ _____

BANK _____ ACCOUNT # _____ BALANCE \$ _____

IF CHECKING AND/OR SAVINGS ACCOUNTS ARE NOT OPEN, PLEASE EXPLAIN: _____

WHERE ARE YOU GETTING YOUR DOWN PAYMENT? _____

MOTOR VEHICLES: (All family members including company cars)

MAKE _____ YEAR _____ LICENSE # _____ COLOR _____

LIST ANY IRA'S, STOCKS, BONDS, INVESTMENTS AND RENTAL PROPERTY OWNED:

OTHER INCOME: (Please describe in detail)

IS THERE ANYONE WHO WOULD CO-SIGN THE LEASE? Y _____ N _____ IF NO, EXPLAIN WHY _____

NAME OF CO-SIGNER _____ RELATIONSHIP _____

ADDRESS _____ CITY _____

STATE _____ ZIP _____ PHONE (_____) _____

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I/WE AUTHORIZE **MR. KNOPPE** AND ANY COMPANY OR PERSON HE MAY CONTACT TO SUPPLY ANY AND ALL INFORMATION NECESSARY REGARDING OUR BANKING ACTIVITY, RENTAL & CREDIT HISTORY, POLICE RECORDS, CRIMINAL BACKGROUND & EMPLOYMENT HISTORY. CREDIT RECORDS MAY BE OBTAINED NOW AND IN THE FUTURE AND FOR AS LONG AS MONEY IS OWED ON THE ACCOUNT. I/WE UNDERSTAND THAT MISREPRESENTATION OR CONCEALMENT RELATIVE TO ANY OF THE ABOVE FACTS WILL, AT OWNER'S OPTION, VOID MY/OUR RIGHTS UNDER THE LEASE AND OR PURCHASE AGREEMENTS. IF ANY INFORMATION PROVIDED BY YOU IS FOUND TO BE FALSE AND INACURRATE YOUR APPLICATION MAY BE IMMEDIATLEY DENIED AND ALL FUNDS FORFIETED.

RECEIPT OF A NON REFUNDABLE _____ APPLICATION FEE.

RECEIPT OF AN ADDITIONAL \$ _____ PAYMENT IS HEREBY ACKNOWLEDGED. THIS PAYMENT WILL BE APPLIED TOWARD THE LEASE AND/OR PURCHASE IF APPROVED. IF YOU CHANGE YOUR MIND AFTER SIGNING THIS APPLICATION YOUR PAYMENT IS NOT REFUNDABLE.

SIGNATURE _____ DATE _____ PRINT NAME _____

SIGNATURE _____ DATE _____ PRINT NAME _____

APPLICATION REVIEW _____ DATE _____

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