



Century 21 1st American Property Management 8880 E Speedway Blvd Tucson, Az 85710
 520.886.6023 fax 520.886.6188

RENTAL APPLICATION

Rental Address _____ Account _____

Rental Amount/Month _____ Security Deposit _____ Cleaning Deposit _____

Occupancy Date _____ Length of Lease Requested _____

Reason for moving _____

What attracted you to Century 21 1st American? _____

Name of Person(s) applying for rental property:

1 _____ DOB _____
 2 _____ DOB _____
 3 _____ DOB _____

Email Address _____@_____

Emergency Contact Information:

Name _____ Phone _____

Address _____ Relationship _____

I, the undersigned, do hereby certify that the information provided is true and for the confidential use of Century 21 1st American/Owner. (Management reserves the right to deny any applicant because of misrepresentation.) This application grants Century 21 1st American/Owner permission to verify income and/or obtain a Credit Report.

A holding deposit of \$ _____ has been paid with this application evidenced by: _____.
 That acceptance of this holding deposit does not imply approval of the application nor are applications necessarily accepted or denied, the above-mentioned deposit will be returned to applicant. Upon verification of application, acceptance by owner and acknowledgment by applicant, deposit will be retained and applied to rent regardless of occupancy. Copies of the lease and rules are available for preview upon request. This application is contingent upon requests on proceeding pages being agreed to. _____ (applicant) _____ (agent) <---(Please initial)

ALL DEPOSITS AND 1ST MONTH'S RENT MUST BE PAID WITH MONEY ORDER OR CASHIER'S CHECK.
 A \$35 NON-REFUNDABLE PROCESSING FEE PER PERSON IS REQUIRED.

Applicant: _____ Applicant: _____
Signature Signature

Agent for Century 21 1st American _____ Date _____
Signature

A holding deposit of \$ _____ was returned to applicant _____
 on _____ by check number _____.

If your application is approved to rent the property you are applying for, you MUST have the following completed PRIOR to your lease signing:

- Make an appointment to sign the lease with the Agent that showed the property
- All people responsible for the lease must sign at the same time. We can make arrangements for out of town people
- Transfer ALL applicable utilities into your name starting with 1st day of your lease term.
Please bring confirmation numbers for your utility accounts.
- MUST have first month's rent and Security Deposit in the form of Certified Funds
- Provide proof of Renter's Insurance

Applicant Last Name _____

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Please provide all of the information requested below. Incomplete information can delay the processing of your application.
Please Print Clearly.

OCCUPANT(S)

Name _____	Co-Applicant _____
SSN _____ DL# _____	SSN _____ DL# _____
Date of Birth _____	Date of Birth _____
Citizenship _____ Proof _____	Citizenship _____ Proof _____
Phones Home _____ Cell _____ Work _____	Phones Home _____ Cell _____ Work _____

Please list all other occupants:

Name	Age	Relationship	Name	Age	Relationship
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

EMPLOYMENT HISTORY

Current Employer _____
Address _____
Supervisor _____ Phone _____
Gross Monthly Salary _____ Position _____ How Long? _____
Co-Applicant's Employer _____
Address _____
Supervisor _____ Phone _____
Gross Monthly Salary _____ Position _____ How Long? _____

RESIDENTIAL HISTORY

(No Less than 2 years)

Present Address _____
Number Street Apt# City State Zip
 Rent Own Rental/Mortgage Amount Paid Monthly _____ From-To _____
Reason for leaving _____
Landlord Name/Mortgage Company _____ Phone _____

Previous Address _____
Number Street Apt# City State Zip
 Rent Own Rental/Mortgage Amount Paid Monthly _____ From-To _____
Reason for leaving _____
Landlord Name/Mortgage Company _____ Phone _____

Previous Address _____
Number Street Apt# City State Zip
 Rent Own Rental/Mortgage Amount Paid Monthly _____ From-To _____
Reason for leaving _____
Landlord Name/Mortgage Company _____ Phone _____

Applicant Last Name _____

BANKING REFERENCE

Banking Institution Name _____ Phone _____
Address _____
Number Street Apt# City State Zip
Account # _____ Checking Savings

PERSONAL REFERENCES

Name _____ Phone _____
Address _____
Number Street Apt# City State Zip
Name _____ Phone _____
Address _____
Number Street Apt# City State Zip

OTHER INFORMATION

Pets (describe type, age and size) _____

Water-filled furniture (describe) _____

Vehicles/Boats/Rec Vehicles to be parked on Premises including Make/ Model/ Year/ License Plate Number: _____

Are all vehicles legally owned by you, road-ready (operating), and legal to drive in the State of Arizona? no yes

If NO, please explain: _____

In the past, have you been delinquent in paying rent or other financial obligations? no yes

If yes, please explain: _____

In the past, have you failed to perform any obligations of a rental agreement or have you been a defendant in an eviction lawsuit? no yes

If yes, please explain: _____

The information on this application is true and correct to the best of my knowledge.
I hereby authorize Century 21 1st American and its agents to verify the above information and obtain either a consumer or investigative credit report from Contemporary Information Corp.

I understand that the \$ _____ fee for verifying this rental application is not a deposit, will not be applied to any rent, or refunded even if the application to rent is declined.

ALL APPLICANTS MUST SIGN BELOW

SIGNATURE _____ Date _____

SIGNATURE _____ Date _____

FOR OFFICE USE ONLY

NOTE: Advise the applicant to authorize employers, banks and landlords to release all relevant information to Contemporary Information Corporation.

Remarks: _____

Move in Date: _____ Property _____ Monthly rent _____

Advise Applicants _____

Application Declined (reason) _____

AUTHORIZATION FOR FILE DISCLOSURE/CREDIT CHECK

I hereby authorize Century21 1st American Property Management to obtain a consumer credit and/or investigative report from Contemporary Information Corporation (CIC) on myself. I understand that such information may be derived in whole or in part from Experian, Equifax, and/or CIC.

<i>Signature</i>		<i>Date</i>
<i>Full Name (please print)</i>		
<i>Home Address</i>		
City	State	Zip
Social Security Number	Drivers License & State Issued	Date of Birth

In accordance with the Fair Credit Reporting Act, as well as other state and federal laws, this signed form is to be kept on file by CIG client for no less than two years. CIG may request that subscriber supply a copy of the consumer signed Authorization for File Disclosure or application for rental, credit, or employment anytime within that two year period. Failure to comply may result in termination of subscriber's account as well as any criminal or civil penalties that may apply under current law.

Application Approval Date:			
	by:		Century 21 Representative
Application DENIED Date:			
	by:		Century 21 Representative