



### INQUIRY RELEASE FOR OCCUPANCY CONSIDERATION

In consideration for potential residency and/or residency at \_\_\_\_\_ (“Property”), Property Management will make or will cause ZipReports on its behalf to make inquiries, including, but not limited to, your consumer credit history, criminal history, rental history, employment, salary, public records, and other qualities and history pertinent to your qualifications for residency, including reasons for termination of past residency contracts.

In compliance with the Fair Credit Reporting Act, you are entitled to be informed if an adverse action, such as denial of your application, is taken because of information obtained from a credit, criminal or other consumer report. If such an event occurs, Property Management will provide you with information on how to correct any inaccuracies that may appear on your consumer report.

Please complete and sign below to authorize, without reservation, any party, including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories, contacted by Property Management or its agent to furnish any or all of the above-listed information. Your authorization releases Property Management and its agent from any and all liability for damages arising from the investigation and disclosure of the requested information. Further, it releases and discharges from all liability all companies, agencies, officials, officers, employees and other persons, who, in good faith, provide to us the above-mentioned information as requested, in order to successfully complete a background investigation.

*Your signature(s) allow(s) a photocopy or fax copy of this authorization to be as valid as the original.*

Applicant’s full name:	
Applicant’s signature:	Date:
Applicant’s social security number:	Date of birth:
Current address:	
Former address:	
Income:	Proposed Rent:

Spouse’s full name:	
Spouse’s signature:	Date:
Spouse’s social security number:	Date of birth:
Income:	Proposed Rent:



PO

**RENTAL APPLICATION  
Commercial Lease**

The undersigned hereby makes an application to rent the following property:

Anticipated move date of \_\_\_\_\_ at a monthly rent of \$ \_\_\_\_\_  
and security deposit of \$ \_\_\_\_\_.

**PLEASE TELL US ABOUT YOURSELF**

Full Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Email Address: \_\_\_\_\_ (optional)  
Other Phone \_\_\_\_\_  
Co-Applicant Name \_\_\_\_\_  
Names of Dependents \_\_\_\_\_  
Co-Applicant Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_  
Dependents Date of Birth \_\_\_\_\_  
Pets \_\_\_\_\_

**PLEASE GIVE RESIDENTIAL HISTORY (LAST 3 YEARS)**

Current Address \_\_\_\_\_ Apt# \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Month/Year Moved In \_\_\_\_\_ Reasons for Leaving \_\_\_\_\_  
Rent \$ \_\_\_\_\_  
Owner/Agent \_\_\_\_\_  
Phone \_\_\_\_\_  
Previous Address (last 3 years) \_\_\_\_\_  
Rent \$ \_\_\_\_\_  
Owner/Agent \_\_\_\_\_ Phone \_\_\_\_\_

List all additional Adults and Children who will occupy unit

If this box is checked there shall be no additional occupant(s).

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

**PLEASE DESCRIBE YOUR CREDIT HISTORY**

Have you declared bankruptcy in the past seven (7) years?	Yes _____	No _____
Have you ever been evicted from a rental residence?	Yes _____	No _____
Have you had two or more late rental payments in the past year?	Yes _____	No _____
Have you ever been convicted of a crime?	Yes _____	No _____
Have you ever willfully or intentionally refused to pay rent when due?	Yes _____	No _____



PO

I hereby apply to lease the above described premises for the term and upon the set conditions above set forth and agree that the rental is to be payable the first day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts, all of the deposit will be retained to offset the agent's cost, time, and effort in processing my application.

I hereby deposit \$\_\_\_\_\_ as earnest money to be refunded to me if this application is not accepted in 3 business banking days. Upon acceptance, this deposit shall be retained as part of the security deposit. When so approved and accepted, I agree to execute a lease for \_\_\_\_\_ months before possession is given and to pay the balance of the security deposit prior to the move in date. If the application is not approved or accepted by the owner or agent, the deposit will be refunded, the application hereby waiving any claim for damages by reason of non-acceptance which the owner or agent may reject. I recognize that as a part of your procedure for processing my application, and investigative consumer report may be prepared whereby information is obtained through personal interviews with others with whom I may be acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living.

The above information, to the best of my knowledge, is true and correct. I addition, I acknowledge the non-refundable \$100 application fee.

Please sign:

X \_\_\_\_\_  
Name of Applicant Date

X \_\_\_\_\_  
Name of Co-Applicant Date

**AUTHORIZATION  
Release of Information**

I authorize an investigation of my credit, criminal records, public recrods, tenant history, banking and employment for the purposes of renting a house, apartment, or condominium from this owner/manager.

\_\_\_\_\_  
Name (please print)

X \_\_\_\_\_  
Signature Date

Name (please print)

X \_\_\_\_\_  
Co-Applicant Signature Date



**zip** REPORTS

EXPRESS BACKGROUND SCREENING

**APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)**

Deposit of \$ \_\_\_\_\_ Received by \_\_\_\_\_

Date \_\_\_\_\_

OFFICE NOTES: