

Rental Application

Desired Move-in Date:/ Unit					
APPLICATION INFORMATION					
Lessee #1					
Name (full legal name):					
Date of Birth: Social Security Number:					
Home Phone:					
Work Phone:					
Cell Phone: Driver's License / ID Number:					
(Please provide a copy of your Drive	r's License for	verification purposes	3)		
(comes become a seb) and a second			,		
Lessee #2					
Name (full legal name):					
Date of Birth:					
Social Security Number:					
Home Phone: Work Phone:					
Cell Phone:					
D					
(Please provide a copy of your Drive	r's License for	verification purposes	<u>;</u>		
Driver's License / ID Number: (Please provide a copy of your Driver's License for verification purposes) NAME OF OCCUPANTS AND RELATIONSHIP TO APPLICANT					
NAME OF OCCUPANTS AND RI	ELATIONSHI	P 10 APPLICANT			
Name:		Relationship:			
Name:		Relationship:			
Name:		Relationship:			
Name:		Relationship:			
APPLICANT / OCCUPANT VEHICLES					
Lessee #1: Make Mode	el	Year	Tag Number		
Lessee #1: Make Mode Lessee #2: Make Mode	el	Year	Tag Number		

(Please Give Employment Details For Past Four (4) Years For Each Lessee) Lessee #1 **Current Employer:** Name: _____ Address: _____ Phone: ____ Supervisor: ____ Length of Employment: Start: _____ End: ____ **Previous Employer:** Name: Address: Phone: Supervisor: Length of Employment: Start: End: **Previous Employer:** Name: _____ Address: _____ Phone: _____ Supervisor: _____ Length of Employment: Start: _____ End: ____ **Previous Employer:** Name:____ Address: _____ Phone: ______ Supervisor: _____ Length of Employment: Start: End: Lessee #2 **Current Employer:** Name: _____ Address: _____ Phone: _____ Supervisor: _____ Length of Employment: Start: End: **Previous Employer:** Length of Employment: Start: _____ End: ____ **Previous Employer:** Name: Address: Phone: Supervisor: -Address: _____ Length of Employment: Start: _____ End: ____ **Previous Employer:** Name: Address: Phone: Supervisor: Length of Employment: Start: End:

EMPLOYMENT HISTORY

(Please Give Rental History Details For Past Thr	ee (3) Years For Eac	ch Requested Lessee)
Lessee #1		
Current Address:		Zip:
Current Address: Dates Lived At This Address: Start:	End:	Rent:
Landlord / Manager:	Landlord / Manager Phone:	
Previous Address:		Zip:
Previous Address: Dates Lived At This Address: Start:	End:	Rent:
Reason For Leaving:		
Reason For Leaving: Landlord / Manager:	Landlord / Mana	ger Phone:
Previous Address: Dates Lived At This Address: Start:	Fnd:	Rent:
Reason For Leaving:	Did.	Rent.
Landlord / Manager:	Landlard / Manager Phone	
Landiora / Managor.		ager i none.
Lessee #2		
Comment Address .		7: _m .
Current Address: : Dates Lived At This Address: Start:	F., J.	Zip:
Dates Lived At Tills Address: Start:	Ella:	Rent:
Reason For Leaving: Landlord / Manager:	Landlard / Mana	gar Dhona
Landiord / Manager.		iger Frione.
Previous Address:		Zip:
Previous Address: Dates Lived At This Address: Start:	End:	Rent:
Reason For Leaving:		
Landlord / Manager:	Landlord / Mana	ger Phone:
Previous Address:		Zip:
Dates Lived At This Address: Start:	End:	Rent:
Reason For Leaving:		
Reason For Leaving: Landlord / Manager:	Landlord / Mana	ger Phone:
INCOME		
	Lesse	ee #1 Lessee #2
Gross Monthly Employment Income Before Ded		
Gross Monthly Income From Other Sources:	\$	\$ \$
,	*	
TOTAL GROSS MONTHLY INCOME:	\$	\$

RENTAL HISTORY

Lessee #1				
Checking: Instituti	on:	B	Branch:	
Savings: Instituti	on:	B	Branch:	
Credit Card: Type	Amount Owed \$		Monthly Payment	\$
Credit Card: Type	Amount Owed \$		Monthly Payment	\$
Vehicle: Loan Amoun	t Loan Amount		Monthly Payment	\$
Other: Creditor	Loan Amount		Monthly Payment	\$
Other: Creditor	Loan Amount		Monthly Payment	\$
TOTAL MONTHLY F	PAYMENTS:			\$
Lessee #2				
Checking: Instituti	on:	B	Branch:	
Savings: Instituti	on:	B	Branch:	
Credit Card: Type	Amount Owed \$		Monthly Payment	\$
Credit Card: Type	Amount Owed \$		Monthly Payment	\$
Vehicle: Loan Amoun	t		Monthly Payment	\$
				Φ
Other: Creditor	Loan Amount		Monthly Payment	\$
Other: CreditorOther: Creditor	t Loan Amount Loan Amount		Monthly Payment Monthly Payment	
Other: Creditor	Loan Amount			\$
TOTAL MONTHLY F	Loan Amount			\$
TOTAL MONTHLY F APPLICANT PERSO	PAYMENTS:			\$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1	PAYMENTS: ONAL REFERENCES		Monthly Payment	\$\$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1	PAYMENTS: ONAL REFERENCES		Monthly Payment	\$\$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1	PAYMENTS:		Monthly Payment	\$\$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How	PAYMENTS: ONAL REFERENCES Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How	PAYMENTS: ONAL REFERENCES Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How	PAYMENTS: ONAL REFERENCES	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How Name: Phone: Known Reference How	PAYMENTS: PAYMENTS: PAYMENTS: Relationship: v Long?: Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How Name: Phone: Known Reference How	PAYMENTS: PAYMENTS: PAYMENTS: Relationship: v Long?: Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How Name: Phone: Known Reference How	PAYMENTS: ONAL REFERENCES Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How Name: Phone: Known Reference How Name: Phone: Known Reference How Name: Known Reference How	PAYMENTS: PAYMENTS: PAYMENTS: Relationship: v Long?: Relationship: v Long?:	Address:	Monthly Payment	\$ \$
TOTAL MONTHLY F APPLICANT PERSO Lessee #1 Name: Phone: Known Reference How Name: Phone: Known Reference How Name: Known Reference How Lessee #2	PAYMENTS: PAYMENTS: PAYMENTS: Relationship: v Long?: Relationship: v Long?:	Address: Address:	Monthly Payment	\$ \$

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APPLICANT PERSONAL REFERENCES (continued) Lessee #2				
Lessee #2				
Name:		Address:		
Phone:	Relationship:			
Known Reference How Long?:				
Name:		Address:		
Phone:	Relationship:			
Known Reference How Long?:		Address:		
MISCELLANEOUS				
Do You Smoke? Yes No		raper Tenant Other To Create Strong Odors? Yes No		
		Yes No If Yes, Give Details Below		
Have You Ever Been Evicted?: Ye	es No	If Yes, Give Details Below		
Have You Ever Been Convicted On	f A Crime? Yes	No If Yes, Give Details Below		
Have You Ever Filed For Bankrupt	ccy? Yes N	Io If Yes, Give Details Below		
Explanation:				
APPLICANT EMERGENCY CO				
Address:		Relationship: Phone:		
terminated if I have made any false, misle information provided in this application through credit bureaus, contact with curre personal references. The Lease begins Application and (ii) payment of the Secu Further, until the Security Deposit is paid pays the Security Deposit. If application	rading, or incomplete, including financial ent and previous empimmediately upon (arity Deposit even the distribution of the contract of the co	ove is true and correct. I fully understand that my Lease may be estatement(s) in this application. I hereby authorize verification of all l and credit information. Applicant understands this will be done ployers, contact with current and previous landlords, and contact with (i) Landlord's communication to Applicant of the approval of the nough the commencement of the Lease term may be on a later date, the right to lease the unit to another Applicant who is approved and or Applicant is notified of approval, Applicant forfeits any Security lost rent for holding an apartment off the market.		
Applicant Signature:		Date:		
Applicant Signature:		Date:		
This application can be returned via	a mail, fax, or em	ail to:		
Forest Ridge 1, LLC 1220 Sierra Drive NE Cedar Rapids, IA 52402 P: 319-362-4055 F: 319-362-4159) Email: <u>Leasing</u>	<u>g@theForestRidge.com</u>		