TRI
PROPERTY MANAGEMENT

RENTAL APPLICATION

APPLICATION DATE:_____ **PROJECTED MOVE IN DATE:**_____ **APT. NO:**_____

Welcome! Thank you for completing your Resident Application at:_____

Applicant Name:_____
(Last) (First) (MI)

Date of Birth: _____ Soc. Sec. No.: _____

Driver's Lic. No & State:_____ Other Government ID Type & No.: _____

Telephone No.: _____ Names used in the last 10yrs.: _____

Email Address: _____ Alternate Telephone No.:_____

*Occupants 18 yrs and older are required to submit separate application and fee.

Names/D.O.B of other occupants_____

_____

Pets (Yes_____) (No_____) How Many _____ Type _____

♦PERSONAL:

Current Address: _____City_____ST_____Zip_____

Rent or Own? _____ Monthly Payment: _____ Move-In Date: _____ Move-Out Date: _____ Pay on Time? _____

Mortgage Co. _____ Account No. _____

Reason for moving? _____

Landlord name/Apt Community name: _____Phone Number: _____

Previous Address: _____City_____ST_____Zip_____

Rent or Own? _____ Monthly Payment: _____ Move-In Date: _____ Move-Out Date: _____ Pay on Time? _____

Landlord's Name: _____Phone Number: _____

Reason for moving? _____ Will your Landlord give you a good reference? _____

Vehicle Information:

License # and State: _____ Make/Model/Yr.: _____ Color: _____

Have You Ever: Been evicted or asked to move? _____ Convicted of sale or manufacture of controlled substances? _____

Filed Bankruptcy? _____ When Discharged? _____ Do you have a waterbed? _____

♦APPLICANT'S EMPLOYMENT:

Current Employer: _____ HR Phone: _____

Address: _____City_____ST_____Zip_____ Your Position: _____

Gross Monthly Salary/Wages: _____ Supervisor's Name: _____ Start date_____

Previous Employer(s) (If less than 1 year at present position):

Name: _____ Address: _____ Phone: _____

♦ **FINANCIAL INFORMATION:**

Additional Income: Overtime, Commission, Tips, Pension, Retirement, Investment, Worker's Comp, Alimony, Child Support, Other

Source/s: _____ Annual amount: _____

Who could we contact for you in case of an emergency?

Name: _____ Address: _____ Phone: _____Relationship_____

Name: _____ Address: _____ Phone: _____Relationship_____

In compliance with the FAIR CREDIT REPORTING ACT, this is to inform you that a credit investigation involving the statements made on this application for tenancy of this rental community is being initiated. I further authorize TRI Property Management Services, Inc., to obtain credit reports, character reports, and rental history as needed to verify all information put forth in this application. Management reserves the right to terminate at its election if any person knowingly or willingly makes fraudulent statements on this application. It is illegal and against our policy to discriminate against any person because of race, religion, color, sex, national origin or disability. I understand that I acquire no rights in an apartment until a fully executed rental agreement has been completed and all monies due have been paid. I certify that to the best of my knowledge, all statements and true and complete.

X_____ **X**_____
Applicant **Date of Application**