

**Carole Jean Estates
Apartments
Rental Application**

Apartment applied for: _____

Date: _____ Interviewed by: _____

Name of Applicant: _____

Home phone # _____ Cell phone # _____

Social Security # _____ Date of birth _____

Drivers license # _____ Email _____

How many in family? Adults: _____ Children: _____

Employer: _____ Employers #: _____

How long at present job? _____ Income: _____

Present address: _____
(Street) (City) (State) (Zip Code)

Landlord _____ Phone: _____

TENANT 2 INFORMATION

Name: _____ Date of birth _____

Cell phone # _____ Income: _____

Social Security # _____ Drivers license # _____

Employer _____ Employers # _____

Landlord _____ Phone: _____

Present address: _____
(Street) (City) (State) (Zip Code)

PERSONAL REFERENCES

| NAME | RELATIONSHIP | PHONE |
|-------------|---------------------|--------------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |

3 _____

Have you ever filed for Bankruptcy? Yes _____ No _____ If yes, when? _____

Been served an eviction notice or been asked to vacate a property? Yes _____ No _____

Willfully or intentionally refused to pay rent when due? Yes _____ No _____

Number of vehicles (including company cars) _____

Make/Model _____ Year _____ License Plate _____

Make/Model _____ Year _____ License Plate _____

Please read the following carefully before signing

I {we} hereby make application for an apartment and hereby certify that the foregoing information is true and accurate to the best of my {our} knowledge. I {we} hereby authorize Carole Jean Estates Apartments and Credit Bureau or other investigative agency employed by Carole Jean Estates Apartments to investigate our references, statements or other data herein listed. Obtained from me or any other person pertaining to my {our} financial responsibility.

Applicant Date _____

Co-Applicant Date _____

Rental unit applied for _____ Commencement Date _____

Rent amount: _____

Please read the following carefully before signing and making deposit

I {we} understand the deposit to hold the apartment is NON-REFUNDABLE after 3-Business Days at _____ am/pm. If this application is not accepted by Carole Jean Estates Apartments, the deposit shall be refunded. The applicant hereby waiving any claim or damages by reason on non-acceptance upon the owner or his agent my rejection without stating any reason to do so.

I {we} understand that if for any reason the apartment is not available at the beginning of the term of the lease, I will be entitled to an adjustment of rent on a per diem basis until the apartment is available.

I {we} further understand that Carole Jean Estates Apartments will not be responsible for any expenses or damages which result from the delay and it will not give me {us} the right to cancel the lease agreement

Applicant Date _____

Co-Applicant Date _____

