

Application to Rent - 1 Per Adult Occupant

609 S. Lynn Street, Seymour

Monthly Rent: \$850.00

Security Deposit: \$600.00

No Pets!

This application must be completed for each adult resident that will be named on the lease for the property named above. Your responses to this application shall be held in the strictest of confidence. Your information will be verified before any leasing decision is made.

PERSONAL INFORMATION				
Name			Spouse	
Address				
Phone #				
SSN			Spouse SSN	
Birthday			Spouse Birthday	
	Year	Make	Model	License Number
VEHICLE INFORMATION				
DO YOU SMOKE? YES / NO SPOUSE? YES / NO Any Occupant? YES / NO				
EMERGENCY CONTACT - Someone who will NOT occupy home.				
Name			Relationship	
Address			Phone #	

MINIMUM REQUIREMENTS:	
8 Person Maximum (2 per Bedroom)	
No pets, no exceptions!	
\$3000 Minimum Household Income	
6 Months with Current Employer	
Sec 8 / HUD NOT Considered	
Non-Smokers Preferred	
GENERAL APPLICANT INFORMATION	
Any Evictions?*	Y / N
Any Bankruptcy in past 2 yrs	Y / N
Any Criminal charges filed?*	Y / N
Any Judgments against you?*	Y / N
Any Special Needs?	Y / N
# times rented in past 3 yrs:	
<i>* If YES, completed pg2 required</i>	

RESIDENCE HISTORY

Please indicate your residence history for the past 5 years. Please explain any gaps in residence history. Please continue on reverse if needed

From / To	Address	City, State, Zip	Landlord Name	Landlord Phone	Rent/Mo

EMPLOYMENT HISTORY

Please indicate your employment history for the past 5 years. Please explain any gaps in employment. Please continue on reverse if needed.

From / To	Company	City, State, Zip	Supervisor	Co. Phone	Earnings

Every applicant shall be required to submit a photo copy of their driver's license or other state-issued photo ID card, and the copy shall be enlarged 200%. (Library has cheap copy machines.) Copy shall be delivered to Landlord with this application. **NO EXCEPTIONS.** If approved, all adult tenants agree to be present at move in to conduct video inspection of premises.

By signing below, I grant the landlord permission to obtain Employment History and Residence History Data, as well as permission to obtain credit and other background information. ***FALSIFICATION or INCOMPLETE application information is grounds for automatic refusal of application to rent.**

Every adult tenant who will be named on the lease shall pay a non-refundable application fee of \$20 upon submission of application; husband and wife count as one. If tenant is approved, each \$20 payment shall go towards the first rent due.

Applicant Signature _____ Date _____

Applicant Name (Printed) _____

Steve Freeman, Landlord
812-528-0976 / 812-358-8635
1790 N County Rd 180 E, B'town - Always call first!

Applicant Name

Today's Date

Property Address

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For each and every Eviction, or instance where charges were filed against you and you appeared before a Judge, please provide detail information in the spaces below. If you need more than one sheet, please copy this sheet prior to filling in the blanks and use it as needed in order to capture your background. An eviction, criminal charge, and/or incarceration is not necessarily automatic grounds for refusal to rent. The merit of each case shall be evaluated by the Landlord prior to making any decision to rent. False, misleading, or incomplete information may be grounds for refusal to rent. Please consult your attorney, courthouse, or MyCase.IN.gov for information needed for this form.

Cause No.

Plaintiff

Date Filed

Charges Filed

Sentence of Court

Judgment Amount \$

Judgment Amt Paid to date

Plaintiff Phone #

Incarceration Information

Location (City, ST)

Intake Date

Release Date

Parole Status

On Parole Now for this Cause? Y / N

Date Parole Ends/Ended

Cause No.

Plaintiff

Date Filed

Charges Filed

Sentence of Court

Judgment Amount \$

Judgment Amt Paid to date

Plaintiff Phone #

Incarceration Information

Location (City, ST)

Intake Date

Release Date

Parole Status

On Parole Now for this Cause? Y / N

Date Parole Ends/Ended

Cause No.

Plaintiff

Date Filed

Charges Filed

Sentence of Court

Judgment Amount \$

Judgment Amt Paid to date

Plaintiff Phone #

Incarceration Information

Location (City, ST)

Intake Date

Release Date

Parole Status

On Parole Now for this Cause? Y / N

Date Parole Ends/Ended

Applicant Signature

Date

Applicant Name (Printed)