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APARTMENTS and CONDOS	

APPLICATION FOR PROSPECTIVE TENANT

DATE_______ Dation must present a government issued identification, which includes a photo.

Each application must present a government issued identification, which incl	ud
A non-refundable application fee of \$25 must be attached	

APPLICANT'S NAME	Date of Birth				
Social Security#	Phone Number				
Current Address	How Long				
City	State	Zip Code			
Present Landlord		Phone Number			
Previous Address		How Long			
City	State	Zip Code			
Landlord's Name					
Current Employer		Phone Number			
Supervisor					
Previous Employer		Phone Number			
Supervisor		How Long			
Applicant's Monthly Income	Other Income				
Name of Bank					
Year & Make of Vehicle	Color				
License Plate#	Registered To				
Additional Vehicles					
CREDIT REFERENCE		PHONE#			
IF CHILDREN, NAMES AND AGES					

Have you ever at any time been convicted of a crime involving the manufacture, distribution, or sale of a controlled substance? Yes/No If yes, you may provide additional information about this conviction on a separate page that you feel Landlord may want to consider.

Have you been convicted within the past six years of a crime involving assault, rape, physical violence, sexual harassment, theft, crime involving dishonesty, or possession of illicit drugs? Yes/No (also circle each that applies)

If yes, you may provide additional information about this conviction on a separate page that you feel Landlord may want to consider.

By signing this application, I, the undersigned, acknowledge I have been informed of the following policies as stated below:

a. Applicant must pay a non-refundable application fee of \$25.00.

b. Applications WILL be denied for the following reasons:

- 1. Income is less than 3 times the monthly rent;
- 2. History of manufacture, distribution or sale of controlled substances by applicant(s)
- 3. Requesting pet.
- 4. Requesting more occupants than 5 for two-bedroom apartment.
- c. Applications MAY be denied for the following reasons:
 - 1. FICO credit score 620 or less;
 - 2. Credit report contains open collection accounts (except medical);
 - 3. Credit report contains an open bankruptcy or bankruptcy within last 7 years;
 - 4. Conviction within last six years of a felony or misdemeanor involving sex, violence, illicit drug possession, or theft;
 - 5. Prior eviction;
 - 6. Unverifiable, misleading or false information on application;
 - 7. Incomplete or unsigned rental application;
 - 8. Abusive or threatening language or behavior during the rental process.

By signing this application, I, the undersigned applicant, warrant and represent the information on this application for residency is true and correct and the Management/Owner is authorized to verify this information. However, I acknowledge and understand that Management/Owner undertakes no obligation to verify the accuracy of any information provided by me in this application.

Any person/firms may freely give any requested information concerning me and I hereby knowingly and voluntarily waive all right of action for any consequence resulting from such information. In addition, I hereby authorize Management/Owner to release any and all information in this application on my behalf and lawfully serves as basis for lease termination and/or eviction.

I hereby authorize the Landlord or Landlord's agents to verify the information on the application. Verification or re-verification of any information contained in the application will be retained by Landlord. I hereby authorize Tenant Data Services Inc. to obtain information about me, including, but not limited to, this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, and I hereby authorize & instruct any entity or person contacted by Tenant Data Services Inc. or the Landlord or Landlord's agents to release such information to them. Upon request, Tenant Data will provide the name & phone number of the source of the information used in the verification process.

Applicant's Signature A photocopy or fax may be used in lieu of the	original.	Date	••	ant's Printed Name	*****
		FOR OFFICE USE	ONLY		
	Please	ARTMENTS / L & R F respond by FAX as q 402-753-0801	uickly as	possible	
Date: From	n:				
То:					
We would appreciate your assistance apartment).	with providing	g RENTAL VERIFICAT	ΓION on tl	ne following (in order to	qualify them for a new
RE:					
ADDRESS:					
Please verify name on lease:					
Additional occupants:					
Rent amount paid:	_per month	Paid on Time?	YES	NO	
If NO, number of times late:		Number of NSF's _			
Complaints/Problems: YES NO		Damages?	YES	NO	
Dates Rented: From	to				
Dates of Lease: From	to				
Gave Notice? YES NO	Would yo	u Re-rent to Above?	YES	NO	
Any Legal Notices? YES NO If	YES Explain				
Was an Eviction ever cancelled?					
Verified by: Name			Title		