RENTAL APPLICATION FOR MARRIED COUPLE

Neatly complete all information below. All other applicants over the age of 18 must complete and sign their own application.

Primary Applicant	Phone		e #DOB	
Social Security #	Drivers License #		State_	Exp
Email address:				
Current Landlords Name_			Phone #	
How long at this address_	Reason for leaving_			
Previous Address		City	State	Zip
Previous Landlords name_			Phone #	
How long at this address_	Reason for leaving_			
Auto YrMake	ModelState/License plate #			
Present Employer	F	Position	Phone #	
Employers Address		City	State	_Zip
Phone #	How long at this job	Mo Income		
Other Income/sources				
Co-applicant				DOB
Social Security #	Drivers License #		State	Exp
Present Employer	Position_		Phone #	
Employers Address		City	State	_Zip
Phone #	How long at this job	Mo Income		
Number and type of pets_	Have either of you ever been party to an eviction? [] Yes [] No			
Total number of adults	Total number of children living with you under the age of 18			
Names and relations of all	other applicants			
statements contained in this a	en herein are true and complete application for tenet screening a ate any rental agreement entere	as may be necessary in	n arriving at a tenant de	ecision. I understand
Signature			Date	
Signature			Date	
Received from applicants the	e non-refundable sum of \$	dollars to pay for t	enant screening service	es from A.C.B.

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