

**APPLICATION FOR RENTAL**

Eagleview Apartments, 1436 Eagleway Drive, Ashland, OH 44805

Phone: (419) 281-3680 Fax: (419) 281-3681

Notice: All adult applicants (18 years or older) must complete a separate application for rental.

APARTMENT	RENT	START DATE	AGENT	
<b>APPLICANT INFORMATION</b>				
LAST NAME	FIRST NAME	M.I.	SSN	DRIVER'S LICENSE #
BIRTH DATE	HOME PHONE ( )	WORK PHONE ( )	CELL PHONE ( )	EMAIL
<b>CURRENT ADDRESS</b>				
STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE ( )	
MONTHLY RENT \$	REASON FOR LEAVING			
<b>PREVIOUS ADDRESS</b>				
STREET ADDRESS		CITY	STATE	ZIP
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE ( )	
MONTHLY RENT \$	REASON FOR LEAVING			
<b>OTHER OCCUPANTS</b>				
LIST NAMES AND BIRTH DATES OF ALL ADDITIONAL OCCUPANTS 18 YEARS OR OLDER				
LIST NAMES AND BIRTH DATES OF ALL DEPENDANTS 18 YEARS OR YOUNGER				
<b>PETS</b>				
PETS? <input type="checkbox"/> YES <input type="checkbox"/> NO	BREED	WEIGHT		
DESCRIBE				
<b>EMPLOYMENT &amp; INCOME INFORMATION</b>				
1. OCCUPATION		EMPLOYER/COMPANY		MONTHLY SALARY \$
SUPERVISOR NAME		SUPERVISOR PHONE ( )	START DATE	END DATE
2. OCCUPATION		EMPLOYER/COMPANY		MONTHLY SALARY \$
SUPERVISOR NAME		SUPERVISOR PHONE ( )	START DATE	END DATE
1. OTHER INCOME DESCRIPTION				MONTHLY INCOME \$
2. OTHER INCOME DESCRIPTION				MONTHLY INCOME \$
<b>EMERGENCY CONTACT</b>				
1. NAME	ADDRESS	PHONE ( )	RELATIONSHIP	
2. NAME	ADDRESS	PHONE ( )	RELATIONSHIP	
<b>PERSONAL REFERENCES</b>				
1. NAME	ADDRESS	PHONE ( )	RELATIONSHIP	



<b>2. NAME</b>	<b>ADDRESS</b>	<b>PHONE</b> ( )	<b>RELATIONSHIP</b>
<b>3. NAME</b>	<b>ADDRESS</b>	<b>PHONE</b> ( )	<b>RELATIONSHIP</b>

**BACKGROUND INFORMATION**

<b>HAVE YOU EVER:</b>	Filed for bankruptcy?	Willfully or intentionally refused to pay rent when due?
	Been evicted from a tenancy or left owing money? If yes, please provide Property Name, City, State, and Landlord Name. <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Been convicted of a crime? If yes, please provide Type of Offense, County, and State. <input type="checkbox"/> Yes <input type="checkbox"/> No	

**VEHICLE INFORMATION**

<b>1. MAKE &amp; MODEL</b>	<b>YEAR</b>	<b>LICENSE NO. &amp; STATE</b>
<b>2. MAKE &amp; MODEL</b>	<b>YEAR</b>	<b>LICENSE NO. &amp; STATE</b>

**OTHER VEHICLES**

**OTHER INFORMATION**

**HOW DID YOU HEAR ABOUT THIS PROPERTY?**

**PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUATE THIS APPLICATION**

I hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental is to be payable the 1st day of each month in advance. I warrant that all statements above set forth are true.

I hereby give my permission to communicate with my current and former landlord or property manager for the purpose of discussing any and all of the facts and circumstances of my current or former tenancy, as well as the other information listed above. I also give my permission to communicate with my current employer(s) and/or supervisor(s) for the purpose of verifying the employment information listed above. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, eviction search and criminal background check will be done in conjunction with my application. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

\_\_\_\_\_  
(Signed/Applicant) Date

**BILLING INFORMATION FOR APPLICATION FEE**

**CARD TYPE**  
 VISA     MASTERCARD     AMERICAN EXPRESS

<b>NAME ON CARD</b>	<b>CARD NUMBER</b>	<b>EXPIRATION DATE</b> /
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<b>BILLING ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
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My signature below authorizes ON-SITE MANAGER, INC. (OSM), a credit screening company, to conduct a background check, including obtaining a consumer credit report. I understand that OSM will charge the above credit card for this service \$40.00 per applicant. I agree to pay for this charge according to the terms of my CardHolder Agreement.

\_\_\_\_\_  
(Card Holder) Date

