MOSS & COMPANY APPLICATION FOR RESIDENCY

Individual applications required from each occupant 18 years of age or older.

Date:	Community Addre	ess:		Apt #	Apt. Type:	
Monthly Rent:	Ionthly Rent: Move-In Date:		Advertising Source:			
APPLICANT:						
Applicant's Name:			DOB:	Social Security #		
	first, middle, la	st				
Driver's License #	State		Phone #			
(Or other governmen	t issued iD)		Email			
Other Occupants:	(List any additional occupants of	her that the applicants that	will be occupying	the apartment home)		
1. Name:			3. Name:			
2. Name:			4. Name:			
RENTAL HISTORY	: (Please include all addresses yo	ou have occupied in the last	24+ months)			
Current Address:						
	Street	Apt# (if applicable)	City	State	Zip code	
	ed(check one) Dates of Resident	•		lord/ Manager:		
(If owned include mo	rtgage company and loan # above	under landlord)	Contact phon	e number:		
Monthly Payment:	Reason for movin	a:				
<u></u>		J.				
Previous Address:						
	Street	Apt# (if applicable)	City	State	Zip code	
Owned or Rent	ed(check one) Dates of Residen	cy: From: To:	Present I and	lord/ Manager:		
	rtgage company and loan # above	•	Present Landlord/ Manager: Contact phone number:			
Monthly Payment:	Reason for movin	ıg:				
Have you ever been	evicted from any leased premises?		If yes, when?			
Have you ever broken a rental agreement?			lf yes, please e	explain:		
Have you ever been convicted of a felony?		If yes, please explain:				
EMPLOYMENT:						
Present Employer:			Position:			
Business Address:			Phone #:			
Dates of Employment:		Gross Monthly Salary:				
	on:(Please include all verifiable	sources)		_		
Other income source			Amount:	Frequency:		
Other income sourc	:e:		Amount: Account Num	Frequency:		
Name of Bank: Name of Creditor:			Monthly Pymt			
Name of Creditor:			Monthly Pymt			

VEHICLES:

Year & Make	Color	License # an	d State	Registered to	
Year & Make	Color	License # an	d State	Registered to	
PETS:					
Do you own a Pet:	If so, how many?	Туре:	Weight:	Color & Breed:	
		Туре:	Weight:	Color & Breed:	
EMERGENCY CONTACTS:					
Name:		Relationship:	Contact #		
Name:		Relationship:	Contact #		

Applicant understands the application fee is a non-refundable payment for a credit check and processing charge of this application and such sum is not a rental payment or security deposit. This amount will be retained by Owner/Agent to cover the cost of processing application as furnished by the applicant; any false information will constitute grounds for rejection of application. THE RENTAL AGREEMENT WILL NOT BECOME EFFECTIVE UNTIL THIS APPLICATION IS APPROVED BY OWNER/AGENT.

Applicant tenders a good faith deposit to Owner/Agent in the sum of \$______ as a holding deposit; and the sum of \$______ as payment for a non-refundable application fee. If applicant is not approved, the holding deposit will be returned. If the applicant is approved, the holding deposit will be applied to the total security deposit. If after 72 hours of this application, applicant chooses or decides not to proceed with this application and the rental of this unit, applicant acknowledges that they will forfeit the holding deposit as listed above.

Applicant represents that the information provided on this application to be true and correct, authorizes verification of the above items and agrees to furnish additional credit references upon request. Applicant authorizes the Owner/Agent to obtain reports that may include credit reports, criminal history reports, unlawful detainer (eviction) reports, bad check searches, social security number verification, fraud warnings, previous tenant history and employment history. Applicant consents to allow Owner/Agent to disclose tenancy information to previous or subsequent Owners/Agents.

Additionally, Applicant understands that prior to move in they are required to purchase personal liability insurance. Failure to maintain personal liability insurance will be considered a breach of the Lease and may result in termination of tenancy and eviction and/or any other remedies provided by the Lease or state law. Initial ______

Applicant Signature	Date:		
Managing Agent Signature	Date:		

APPLICATION CHECK- FOR MANAGEMENT USE ONLY					
EMPLOYER PREVIOUS LANDLORD					
Date:	Date:				
Name of Contact:	Name:				
Phone Number:	Tenure:				
Length of Employment:	Re-Rent?				
Monthly Compensation	Notes:				
Notes:					