

RENTAL APPLICATION

Los Vecinos Apartments

1950 N.43rd.Avenue, Phoenix AZ. 85009. Phoenix 602.269-6211 losvecinos@flmenterprise.com

Apartment No.		Rent Amount		Requested Lease Term	
Move-In Date		Source		Property Manager Initials	
Leased By		Promo/Special			

***Applicant's Phone # / Email Address**

How did you hear of our Community?	
Why did you choose our Community?	
Why are you leaving your present residence?	

ONE APPLICATION TO BE COMPLETED FOR EACH ADULT

Applicant Name(s)	Birth Date	Social Security #	Drivers License	State of Issue

Occupant(s) - all who will occupy apartment (under 18 years of age)

Occupant(s) Name(s)	Birth Date(s)	Social Security #(s)	Relationship to above Applicant
1.	/ /		
3.	/ /		
4.	/ /		
5.	/ /		
6.	/ /		

RESIDENCY

Current Address	Apartment #	City	State	Zip	County

Landlord/Apartment Name	Contact Phone	Rent Amount	Residency Dates From: To:

Previous Address	Apartment #	City	State	Zip	County

Landlord/Apartment Name	Contact Phone	Rent Amount	Residency Dates From: To:

EMPLOYMENT

Current Employer Name	Address	City	State	Zip

Supervisor's Name	Contact Phone	Employment Dates From: To:	Position/Job Title	GROSS Monthly Salary

Previous Employer Name	Address	City	State	Zip

Supervisor's Name	Contact Phone	Employment Dates From: To:	Position/Job Title	GROSS Monthly Salary

ADDITIONAL INCOME

	\$		\$
Source # 1	GROSS Monthly Amount	Source # 2	GROSS Monthly Amount

ASSETS

		\$	%
Type of Account # 1	Bank Name	Balance	Interest earned

		\$	%
Type of Account # 2	Bank Name	Balance	Interest earned

EMERGENCY CONTACT

Emergency Contact Name	Address	City	State	Zip

Relationship	Home Phone	Work Phone	Cell Phone

The above person is is not Authorized to remove and/or store all contents of dwelling/mailbox in the event of serious illness or death of resident.

VEHICLE(S): Please list all vehicles that will be parked on the premises by any or all of the above applicant(s).

Vehicle #1 Make	Model	Year	Color	License No.	State

Vehicle #2 Make	Model	Year	Color	License No.	State

PET(s) *Breed restrictions apply, fees applicable, no more than two (1) pets per home. This does not apply to assistive animals.

Pet's Name	Kind/Breed	Weight	Age

PET(s) *Breed restrictions apply, fees applicable, no more than two (2) pets per home.

Pet's Name	Kind/Breed	Weight	Age

Please Circle Yes or No

Have you or your spouse ever been evicted? How many times _____	YES	NO
Have you or your spouse ever broken a rental agreement? How many times?	YES	NO
Have you or your spouse ever been arrested or convicted of a felony?	YES	NO
Have you or your spouse ever received deferred adjudication for a felony?	YES	NO
Have you ever received a breach or eviction notice?	YES	NO
Have you or anyone that may live here had pest issues within the past twelve (12) months (Explain).	YES	NO
Are you currently engaged in criminal activity?	YES	NO
Have you or your spouse ever filed Bankruptcy? .	YES	NO
How long ago?		

****A criminal background check on each applicant will be processed.**

