

INDIANA RENTAL APPLICATION

AN APPLICATION FEE OF \$ _____ MUST ACCOMPANY THE APPLICATION AT THE TIME IT IS TURNED INTO CPW PROPERTIES, LLC. THIS FEE IS NONREFUNDABLE, WHETHER APPLICATION IS APPROVED OR DENIED.

FULL NAME: _____
ADDRESS: _____ PHONE: _____
ZIP CODE: _____ BIRTHDATE: _____
HOW MANY MONTH'S / YEARS AT CURRENT RESIDENCE: _____
EMPLOYER'S NAME & PHONE: _____

GROSS INCOME PER MO.: _____ HOW MANY MONTHS / YEARS AT CURRENT JOB: _____
SOCIAL SECURITY NO.: _____
PHONE NO. AND NAME OF NEAREST RELATIVE TO NOTIFY IN CASE OF EMERGENCY: _____

DATE: _____ SIGNATURE: _____

FULL NAME: _____
ADDRESS: _____ PHONE: _____
ZIP CODE: _____ BIRTHDATE: _____
HOW MANY MONTH'S / YEARS AT CURRENT RESIDENCE: _____
EMPLOYER'S NAME & PHONE: _____

GROSS INCOME PER MO.: _____ HOW MANY MONTHS / YEARS AT CURRENT JOB: _____
SOCIAL SECURITY NO.: _____
PHONE NO. AND NAME OF NEAREST RELATIVE TO NOTIFY IN CASE OF EMERGENCY: _____

DATE: _____ SIGNATURE: _____

UPON SIGNING THE APPLICATION APPLICANT GIVES APPROVAL FOR _____ TO RUN A CREDIT CHECK. IF APPLICANT LEASES FROM _____, APPLICANT GIVES APPROVAL TO RELEASE RENTAL HISTORY INFORMATION TO PERSONS VERIFYING SUCH INFORMATION.. ADDITIONALLY, APPLICANT GIVES _____ PERMISSION TO OBTAIN AND/OR REQUEST ANY INFORMATION NECESSARY TO VERIFY THE ACCURACY GIVEN AS PART OF THE APPLICATION.

NUMBER OF PEOPLE TO LIVE IN UNIT, AND NAMES OF ONES NOT LISTED ABOVE: _____

YEAR AND MODEL OF VEHICLE(S): _____

LICENSE PLATE NUMBER: _____

DO YOU HAVE PETS? _____ HOW MANY? _____

REFERENCES · PREVIOUS LANDLORD(S) - NOT RELATIVES OR FRIENDS:

NAME: _____
ADDRESS: _____ PH: _____
YOUR ADDRESS AT THIS LOCATION: _____
ZIP CODE: _____
DATE LIVED AT THIS LOCATION • FROM: _____ TO: _____

NAME: _____
ADDRESS: _____ PH: _____
YOUR ADDRESS AT THIS LOCATION: _____
ZIP CODE: _____
DATE LIVED AT THIS LOCATION • FROM: _____ TO: _____

IF ACCEPTED AS RESIDENT, RESIDENT IS RESPONSIBLE FOR NOTIFYING MANAGEMENT OF ANY OF ABOVE INFORMATION CHANGES, IF APPLICANT TURNS IN AN APPLICATION, AND CANNOT BE REACHED BY PHONE, AT THE PHONE NUMBER PROVIDED ON THE APPLICATION, AFTER TWENTY-FOUR (24) HOURS, THE APPLICATION WILL BE CONSIDERED VOID. THE UNIT APPLICANT IS APPLYING FOR WILL BECOME AVAILABLE FOR RENT TO OTHER APPLICANTS.

APPLICANT HAS TWENTY-FOUR (24) HOURS, AFTER _____, HAS NOTIFIED THEM THAT APPLICATION HAS BEEN APPROVED TO PAY THE SECURITY DEPOSIT TO HOLD THE UNIT AVAILABLE. IF DEPOSIT IS NOT PAID TO _____ WITHIN THAT TIME, THE APPLICATION IS CONSIDERED VOID.

IF APPLICANT AT ANY TIME PUTS DOWN A SECURITY DEPOSIT, APPLICATION IS APPROVED, AND THE APPLICANT CHANGES HIS/HER MIND FOR ANY REASON, THE SECURITY DEPOSIT WILL NOT BE RETURNED, BUT WILL BE KEPT BY _____.

IN COMPLIANCE WITH THE INDIANA FAIR HOUSING ACT, DOES NOT DENY ANYONE HOUSING BECAUSE OF RACE, RELIGION COLOR, SEX, DISABILITY, NATIONAL ORIGIN, OR FAMILIAL STATUS.

INCOME VERIFICATION FORM
FOR RENTAL APPLICATION

I, _____, CONSIDER THIS LETTER AUTHORIZATION TO
RELEASE INFORMATION ON THE AMOUNT OF MY INCOME AND DATE OF
EMPLOYMENT, TO _____, OF _____, INDIANA. THE
INFORMATION WILL BE FROM MY CURRENT PLACE OF EMPLOYMENT,
WHICH IS:

LIST EMPLOYER(S) NAME & PHONE: _____

APPLICANT'S SIGNATURE

DATE

EMPLOYER (INFORMATION FILLED OUT BY EMPLOYER ONLY.)

EMPLOYER PLEASE PROVIDE THE FOLLOWING INFORMATION:

1. DATE OF EMPLOYMENT: _____
2. GROSS INCOME PER MONTH OR YEAR (PLEASE INDICATE) _____

DATE

EMPLOYER'S SIGNATURE & COMPANY NAME

TITLE

THANK YOU IN ADVANCE FOR YOUR TIME

It would be very helpful to us, if you would take the time to check the appropriate line below.

How did you hear about CPW Properties, LLC?

Newspaper Advertising

Sign in Yard

Apartment Shoppers Guidebook

Apartmentguide.com - Internet

Individual Referral

Name of Individual: _____

Herald Times Rentals – Internet

Herald Times Rental Book

Rentbloomington.net - Internet

Rental Verification Form

DATE: _____ NAME: _____

I, _____, consider this letter authorization to release any information on my past rental history to _____ of _____, Indiana. The information will be from my address at the following residence(s):

Applicant's Signature

Applicant's Signature

INF'ORMATION BELOW TO BE FILLED OUT BY LANDLORD ONLY.

Please provide the following information:

- 1. Amount of rent: _____
- 2. Length of residency: _____
- 3. Rent paid on time: Circle Yes No
If no, amount of late pays: _____

- 4. Proper notice given: Circle Yes No
- 5. Would you re-rent: Circle Yes No
- 6. Problems or complaints: Circle Yes No
If yes, please explain: _____

Landlord's Signature

Date

Title