

SHAPELL INDUSTRIES, INC.

APPLICATION TO RENT

APARTMENT ADDRESS: _____

APT#/SIZE _____ / _____ MOVE IN DATE: _____ RATES\$ _____

Each person over the age of 18 must complete an application and be listed on the lease. All applicants will be considered according to our Qualifying Criteria. To expedite the approval of your application, please be sure to include all phone numbers. If phone numbers are missing, the approval process will be delayed. Also, Please include:

Proof of Income (one of the following):

- 2 current paycheck stubs
- If Self Employed-previous year's federal tax return
- Offer of employment letter on company letterhead
- Statement from Government Agencies

Social Security Card and Valid Photo I.D to be verified at move in.

2 Current Month's Bank Statements

APPLICANT								
Full Name (Last, First, Middle Initial)				Date of Birth		Social Security Number		
Applicant's Present Address _____ <input type="checkbox"/> Rent _____ <input type="checkbox"/> Own City _____ State & Zip _____				Dates		Phone Number:		
				From:		Email Address		
				To:				
Present Landlord's Name and Address						Phone Number		
Immediate Prior Address _____ <input type="checkbox"/> Rent _____ <input type="checkbox"/> Own City _____ State & Zip _____				Dates		Prior Landlord Name and Address		
				From:		Phone Number		
				To:				
OCCUPANTS								
Proposed Occupants (Last, First, Middle Initial)			Date of Birth		(Last, First, Middle Initial)		Date of Birth	
EMPLOYMENT/ INCOME SOURCES								
Employer(If self employed name of business), Business Address (including Zip Code)								
Phone Number		Type of Business	Supervisor		Dates	Supervisor	Phone Number	Income
					From			
					To			/mo
Other Income/Source			Amount \$		Contact			
Other Income/Source			Amount \$		Contact			
Immediate Prior Employer Name, Address, Phone Number					Supervisor	Dates	Income	
						From		
						To	/mo	
FINANCIAL								
Checking: Bank and Branch (include city and state)						Account Number		
Savings: Bank and Branch (include city and state)						Account Number		
Have you ever filed for Bankruptcy?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, when Filed _____			
Have you ever been evicted?			<input type="checkbox"/> Yes	<input type="checkbox"/> No				
Have you ever received a Judgment?			<input type="checkbox"/> Yes	<input type="checkbox"/> No				
EMERGENCY INFORMATION								
In case of Emergency, please notify (Local name, address and phone number)						Relationship		
_____						_____		
How did you first learn of this apartment community?								
<input type="checkbox"/> Apartment Guide		<input type="checkbox"/> Drive-By		<input type="checkbox"/> Apartment Magazine				
<input type="checkbox"/> For Rent		<input type="checkbox"/> Newspaper		<input type="checkbox"/> Other				
<input type="checkbox"/> Resident Referral								
<input type="checkbox"/> Internet								

