Rental Application

Milestone Properties LLC Wett & Jundon Jane Aportments Phone: 870-568-0204 Fax: 870-568-0206

Email: milestoneproperties02@gmail.com

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Name: First	Middle	Last	Birth date	Social security #	
L Email address:		Home phone	Cell phone	Driver's license #	
All other occupants		Birth date	Relationship to applicant		
Rental history					
Current residence					
Address		City	State	ZIP	
Monthly rent		Dates of residency (Fro	Dates of residency (From/To) Reason for mov		
Owner/Manager's name		Phone number			
Previous residence					
Address		City	State	ZIP	
Monthly rent		Dates of residency (Fro	Dates of residency (From/To) Reason for moving		
Uwner/Manager's name		Phone number			
Employment his	story				
Current employer		Occupation			
Employer address		Employer's phone	's phone Dates of employment		
Name of supervisor		Monthly pay			
Previous employer		Occupation			
Employer address		Employer's phone	Dates	Dates of employment	
Name of supervisor		Monthly pay			
Vehicle Info					
3.1.2.3	Make/model/year/color License plate number				
Vehicle 1					
Vehicle 2					
Vehicle 3					

Rental References Name Phone Number Rental Address and/or Apartment # General information No Have you ever been late or delinquent on rent? Have you ever been party to a lawsuit? Do you smoke? Do you have any pets? No If yes, list type, breed, weight, and age. If yes to any of the above, please explain why. Why are you moving from your current address? Please list your desired move-in date and the size apartment you are interested in. Rental application fee: $$\frac{30}{}$. Paid Additional questions or comments about anything negative on credit/background report? Agreement & Authorization By signing this application, I verify that the statements in this application are true and correct. I authorize the use of the information and contacts provided to complete a credit, reference, and/or background check. I understand that false or lack of information may result in the rejection of this application. Signature of applicant: Date:



VERIFICATION OF RENTAL HISTORY

10:				
We are requesting verification of rental hipresent or former tenant.	istory for the individual named below, who	states they are a		
Please complete the information and fax to 870-568-0206		I HEREBY AUTHORIZE YOU TO RELEASE INFORMATION REGARDING MY TENANCY TO THE INQUIRING LANDLORD.		
Thank you for your cooperation.				
Cordially, Lindsey Stanley		 		
Milestone Properties, Office Manager	TENANT SIGNATURE	DATE		
Rental history of				
Date moved in Moved of	out Monthly rent \$			
Was rent paid on time? Number	er of times late?			
What was included in rent?				
Number of persons in family?	Did they follow the rules?			
Complaints by others (explain)?				
Care of rental unit:				
Any damage?	Any pets?			
Overall rating as a tenant (good, fair, poo	or, explain)			
Would you rent to them again?				
Did they give notice to move? I	If former tenant, did you return full security	deposit?		
If not, why?				
Person providing information:				
Title·	Phone:			