

# WOODHAVEN MANAGEMENT RENTAL APPLICATION

Name (Occupant)	Social Security Number	Date of Birth	Community: _____	App Fee/ Admin Fee _____
All other Occupants (All persons over 18 must be on the lease)			Bld/Unit#: _____	Date of App: _____
All other Occupants (All persons over 18 must be on the lease)			Type: _____	Date of M/I: _____
			Rent: _____	Lease Term: _____
			Deposit: _____	Called: _____
			Received by: _____	Agent: _____

Present Address	Street	Unit Number	City	State	Zip	Phone Number	
Community/Landlord Name and Address			Phone Number		Dates of Residency		Monthly Rent
Previous Address	Street	Unit Number	City	State	Zip	Phone Number	
Community/Landlord Name and Address			Phone Number		Dates of Residency:		Monthly Rent
Present Employer	Address		Phone	Position	Date Hires	Monthly Income	
Present Employer	Address		Phone:	Position	Date Hires	Monthly Income	

**REQUIRED DOCUMENTATION:**

\_\_\_\_\_ Picture ID/Drivers License

\_\_\_\_\_ Paycheck Stubs (1 month)

\_\_\_\_\_ Rental Verification

\_\_\_\_\_ Extra Documentation

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_

Date: \_\_\_\_\_ Agent \_\_\_\_\_

Present Employer	City/State	Phone Number	Dates	Income
Drivers License State	Drivers License Number/Expiration Date			
Emergency Contact	Phone Number			

**RELEASE**

This is to inform you that as a part of our procedure for processing your application, an investigative consumer report may be prepared whereby information is obtained through personal interviews with your landlord, employer, others with whom you are acquainted, a credit check, and a criminal report. I hereby agree, in the event of the approval of this rental application, to execute a lease in accordance with the lease terms set forth in this rental liability shall commence on \_\_\_\_\_, 20\_\_\_\_.

Pursuant to the terms of the lease. The applicant understands that approval of this application is conditional upon the information supplied in the above mentioned consumer report meeting rental criteria. Owner and/or agent may refuse possession of the above mentioned accommodations because of any derogatory information contained in the consumer report. I have read the foregoing and certify that the information herein is TRUE AND CORRECT. That this application is submitted for the purpose of inducing approval of this application in our behalf, and any errors in this application may be used by the owner and/or agent to terminate the lease at any time.


- Please answer the following questions:**
1. Do you require any special accommodations? \_\_\_\_\_ If so, what type? \_\_\_\_\_
  2. Do you own an animal? \_\_\_\_\_ Is it a service animal? \_\_\_\_\_ If yes, what type? \_\_\_\_\_
  3. Have you ever been evicted? \_\_\_\_\_ If yes, what are the dates: \_\_\_\_\_
  4. Do you own any unpaid rent? \_\_\_\_\_ If yes, how much? \_\_\_\_\_
  5. Have you ever violated a lease, rental agreement or regulations at a former place of rent? \_\_\_\_\_
  6. Have you ever been charged with a misuse or abuse to any rental property? \_\_\_\_\_
  7. Have you ever been convicted of a crime? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

**DEPOSIT AND RECEIPT**

Applicant hereby deposits the amount of \$\_\_\_\_\_. This amount will be refunded if the applicant is not accepted as a resident or if the applicant withdraws this application in writing within 72 hours of submitting the application. If the applicant is accepted and does not enter into a lease agreement, then the amount deposited shall be retained as liquidated damages for holding the apartment off the market. If applicant does enter into a lease agreement, then this document shall become part of the lease. If the landlord determines that any information contained herein is FALSE OR MISLEADING, then at the landlord's opinion, the lease shall be voidable upon 3 days of notice.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



Equal Housing Opportunity

THE \$ \_\_\_\_\_ APPLICATION FEE AND ADMIN FEE \$ \_\_\_\_\_ IS NON-REFUNDABLE