Apartments For You
Leasing Office
112 Manor Court Apt B
Alton, IL 62002

Fax # 618-433-0330 tmentsforvou@vahoo.com

Ph # 618-465-8708

e-mail-apartmentsforyou@yahoo.com Website-<u>www.altonapartmentsforyou.com</u>

RENTAL APPLICATION

COMPLETE ALL SECTIONS AND SIGN—PLEASE PRINT CLEARLY
FAILURE TO COMPLETE ALL SECTIONS CAN BE GROUNDS FOR DENIAL

______Type of unit applying for: ____ studio ____1 bed ____2bed ____3bed

Complex applying for:Cherry hill	lMaple Manor _	Cedar LodgePine Meadow				
Name:						
Current Address:						
Spouse:	_ SSN:	Date of Birth:				
Your Hm. # () (
Maiden Name						
Marital Status:singlemarried	dseparatedc	livorcedwidowed				
No. of occupants: List occupant						
Name (first/last)	DOB/_/_SSN					
	DOB//_SSN					
	DOB//_SSN					
Name (first/last)	DOB//_SSN					
Emergency Contact:	Relationship	PH # ()				
How did you hear about us? For Rer	nt Mag Newspa	per Drive by Other				
Do you have/need a co-signer?y	resno					
RESIDENTIAL HISTORY (single applications)	e/non-married applic	cants must fill out separate				
1. Present Landlord/Complex name:						
Applicants address:						
Landlord's ph# ()da	ate rented From/_	_/To//Rent Amt\$				
Reason for leaving:						
2. Previous Landlord/Complex name Applicant previous address: Prev. Landlord's ph# () Amt\$ Reason for leaving:	Apt. # _ _date rented From_	City/state/zip				
reason for leaving.						
3. Please fill in your Mother's address		City/State/Zip				
	1					
4. Please fill in your Father's address	s: (if different from	above)				
<u>•</u>		City/State/Zip				
	•					

EMPLOYMENT/ OTHER INCOME/ FINANCIAL

1.Current Employer:		Positio	on	From	To
Address:	_ Ph#:		Incom	ne \$	per month
City/State/Zip			Hours	per week_	
Supervisor name and ph #					
2. Previous Employer:		Positio	n	From	To
2. Previous Employer:Address:	_ Ph#		Incom	e \$	_per month
City/State/Zip			Reason	for leaving	<u></u>
Supervisor name and ph #					
3. Spouse's Employer:		_ Positio	n	From	То
Address:					
City/State/Zip					
4. Other Income (per month): SSI \$	SS	SD \$	Child S	Support \$	
Alimony \$ SRS \$ 0 5. Obligations per month: Car(1) \$	Ther \$	<u> </u>	CP:14 C···		
5. Obligations per month: Car(1) \$	Car(2) p	_ Cmia Sup	port \$	
Credit Cards \$ Other \$ 6. Bank Name:	— Chac	dzina	was no	/ Covings	was no
o. Dank Ivame	CileC	Killg	_yesno i	Savings	_yesno
GENERAL QUESTIONS- MUST A	NSWER	RALL	DUESTION	NS (refusal	to answer is
grounds for denial)					
Have you, your spouse, or any occup space)				of form for	more
1. been evicted or asked to leave		•			
2. been in litigation with a landlo					
3. broken a rental agreement or le			•		
4. been sued for non-payment or					
If yes, then list: Date La					
Explain					
6. had any accounts placed for co		ince har	akruptev or	ever if han	kruptev
does not apply?yesno	incetion s	since bai	iki upicy of	CVCI II Dali	Kruptcy
7. had credit problems?yes	no				
8. had a utility company placed for		ion?	ves no		
If yes, please provide: Date			-		
Have you, your spouse or any oc				 ovicted or 1	nled guilty
or "no contest" to:	cupunt n	isica cv	ci been coi	Tricted of j	pica ganty
9. a felony, misdemeanor, or any	crime?	ves	no		
10. a sex crime or listed on a sex of					
11. a drug-related offense?yes_			<i>yes</i> no		
12. received deferred adjudication		me?	ves no		
If yes, please provide: Date					
CountyName at time of					
List Convictions:					

ADDITIONAL INFORMATION: Driver's license #:___ _____ State Spouse's driver's license # __ _____ State___ No. of cars to be parked on the property: _____Do you own recreational vehicles, motorcycles, etc?____ If so, specify_____ A) license plate #_____ State issued___ Model B) license plate #_____ State issued_____ Model Year C) license plate # State issued Model Year D) license plate # State issued Model Year Please list a Character Reference who is not related to you: Name Relationship Ph # False statements or incomplete information will be grounds for denial of this

application.

This application must be signed by all adults who will occupy the apartment before it can be considered by the landlord. Acceptance of this application, and any monies deposited here with is not binding upon Landlord until approved by Landlord in writing. If approved the landlord will hold the rental unit for 3 days. IF APPLICANT WITHDRAWS APPLICATION AFTER SAID THREE DAYS, ALL MONIES DEPOSITED INCLUDING SECURITY DEPOSIT WILL BE FORFEITED TO SAID LANDLORD. In compliance with the Fair Housing Credit Report Act this notice is to inform you that the processing of this application includes but is not limited to making inquires deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from other credit institutions. The undersigned aggress that this application and any information obtained will remain the property of Brandonview LLC and its undersigned successor, Apartments For You. A photographic, faxed, e-mailed, etc copy of this authorization will be recognized as an original.

I hereby grant this property and Brandonview LLC the right to process this application for the purpose of obtaining a rental lease agreement with this property and subsequently in case of violation of lease agreement. Additionally, I authorize all corporations, companies and law enforcement agencies, credit bureaus, academic and financial institutions, current and previous landlords, and current and former employers to release information they may have about me, including criminal records, and release them from any liability and responsibility from doing so.

Management/ Leasing Agent	Date			
Primary Applicant Signature				
Spouse/ Other Applicant Signature	 Date			

THE FEE FOR APPLICATION IS \$25.00 AND IS NON-REFUNDABLE.