

RENTAL APPLICATION

Prospective Address:
420, 420 1/2, 422, 422 1/2 W. Spring St., St. Marys,
OH 45885
 Rent: \$600/month
 Total Security Deposit: \$600

For Office Use Only:

Date/Time Received (order): _____
 Received By: _____
 Total Points: _____

Tenant's Name: _____
 Date of Birth: _____
 Social Security #: _____
 Drivers License #: _____
 Email Address: _____

Desired Length of Occupancy: _____
 Desired Date of Occupancy: _____
 Home Phone: _____
 Cell Phone: _____

Tenant's Name: _____
 Date of Birth: _____
 Social Security #: _____
 Drivers License #: _____
 Email Address: _____

**PLEASE FILL IN ALL FIELDS
 for ALL TENANTS**

Present Address: _____
 City: _____ State: _____ Zip: _____
 How long have you lived at this address? _____ E-Mail: _____
 Why are you moving? _____
 Current Rent: _____ Current Lease Expires: _____
 Present Landlord Name(s): _____ Phone: _____
 Address of Landlord: _____

5-Year Residential History
 List all of the addresses you lived in for the past 5 years.

LANDLORD PHONE NUMBERS REQUIRED!

Address	Start Date	Finish Date	Landlord's Name/ Addr. / Phone
1.			
2.			
3.			
4.			
5.			

Other Tenants: Social Security # Age Relationship Occupation Email

1. _____

2. _____

Vehicle Information:

Make: _____ Model: _____ Year: _____ Color: _____ License Plate #: _____

Make: _____ Model: _____ Year: _____ Color: _____ License Plate #: _____

RENTAL APPLICATION (continued)

Financial Information	Tenant	Co-Tenant
Occupation:		
Employer:		
Business address:		
Business phone:		
Position / Title:		
Supervisor Name / Title /Phone:		
How Long?		
Gross Income:		
Source:	[]Wages []Commission []Salary []Tips []Gov't Asst []Other:	[]Wages []Commission []Salary []Tips []Gov't Asst []Other:
Previous Employer		
How Long?		

Professional References: Address City/State/Zip Phone Time of Acquaintance

1. _____

2. _____

3. _____

4. _____

Nearest Relative: Address City/State/Zip Phone:

Emergency Contact: Address City/State/Zip Phone:

RENTAL APPLICATION (continued)

Miscellaneous Information:

Rate your own cleanliness on a scale of 1(least) to 5 (most): _____

Do you smoke? [] Yes [] No

- Inside your home? [] Yes [] No

- Outside of your home? [] Yes [] No

NOTE: Falsifying any of the following information, as well as any information on this application, will be considered grounds for application rejection.

Have you or any potential tenant living with you ever been convicted of any crime? [] Yes [] No

If yes, please describe:

Are you or any potential tenant living with you currently being charged with a criminal offense by any law enforcement agency (excluding traffic offenses)?

If yes, please describe:

Have you ever been evicted from any tenancy? [] Yes [] No

Have you ever filed a petition for bankruptcy? [] Yes [] No If so, when? _____

Have you ever willfully and intentionally refused to pay rent when due? [] Yes [] No

Do you know of anything which may interrupt income or ability to pay rent? [] Yes [] No

Why? _____

I hereby certify that the answers I have given in this application are true and correct to the best of my knowledge. I understand that any false answers or statements made by me will be sufficient grounds for eviction and loss of any security deposit. I grant Morris Family Investors, LLC the right to investigate all statements made in this application and perform formal background, criminal background, reputation, and credit checks.

Applicant: _____ Date: _____

Co-Applicant: _____ Date: _____

Discrimination:

It is against the law to discriminate against tenants on the basis of race, religion, national origin, age, or neighborhood racial makeup.

Mail to:

422 W. High St., St. Marys, OH 45885