



PHOENIX HOUSING, L.C.

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APPLICATION FOR TENANCY

PROPERTY ADDRESS: _____

PROPERTY WAS SHOWN TO APPLICANT: DATE _____ **TIME** _____ **A.M./P.M.**

APPLICANT:

NAME (first) _____ (middle) _____ (last) _____

MAIDEN NAME _____ DATE OF BIRTH _____

ADDRESS _____

SOCIAL SECURITY # _____ DRIVER LICENSE # _____

PHONE 1 _____ PHONE 2 _____ EMAIL _____

SPOUSE:

NAME (first) _____ (middle) _____ (last) _____

MAIDEN NAME _____ DATE OF BIRTH _____

SOCIAL SECURITY # _____ DRIVER LICENSE # _____

NAMES AND AGES OF ALL CHILDREN WHO WILL BE LIVING WITH YOU:

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

NEAREST RELATIVE NOT LIVING WITH YOU:

NAME _____ RELATIONSHIP _____

ADDRESS _____ PHONE _____

PERSONAL REFERENCE: (NOT RELATED AND HAS KNOWN YOU FOR AT LEAST 3 YEARS)

NAME _____ RELATIONSHIP _____

ADDRESS _____ PHONE _____

INCOME/EMPLOYMENT INFORMATION:

SOURCE _____ PHONE _____

ADDRESS _____

DATE HIRED _____ SUPERVISOR _____

SHIFT: (GIVE TIMES) _____ GROSS MONTHLY INCOME \$ _____

SPOUSE INCOME/EMPLOYMENT INFORMATION:

SOURCE _____ PHONE _____

ADDRESS _____

DATE HIRED _____ SUPERVISOR _____

SHIFT: (GIVE TIMES) _____ GROSS MONTHLY INCOME \$ _____

OTHER INFORMATION:

ARE YOU ON SECTION 8? _____ IF "YES", HOW LONG: _____

DO YOU SMOKE? _____ DO YOU HAVE A WATERBED? _____

DO YOU HAVE OR INTEND TO HAVE ANY PETS? _____ IF YES, HOW MANY? _____

WHAT KIND OF PETS ARE THEY? _____ DO YOU HAVE RENTER'S INSURANCE? _____

WILL YOU BE ABLE TO PAY YOUR FIRST MONTH'S RENT IN FULL TODAY? _____

WE REQUIRE A SECURITY DEPOSIT EQUAL TO ONE MONTH'S RENT TO BE PAID.

WILL YOU BE ABLE TO PAY YOUR SECURITY DEPOSIT IN FULL TODAY? _____

WHICH OF THESE UTILITIES ARE PRESENTLY IN YOUR NAME?

WATER\SEWER\GARBAGE _____ GAS\ELECTRIC _____ NONE _____

LIST ALL CARS OWNED BY YOU OR YOUR DEPENDENTS:

#1 MAKE: _____ YR. _____ LIC.# _____

#2 MAKE: _____ YR. _____ LIC.# _____

WHAT IS YOUR MOVE-OUT DATE FROM YOUR PRESENT ADDRESS? _____

WHAT IS YOUR REASON FOR MOVING? _____

HAVE YOU GIVEN YOUR PRESENT LANDLORD A 30-DAY WRITTEN NOTICE? _____

PRESENT LANDLORD'S NAME: _____ PHONE: _____

WHAT ARE YOU CURRENTLY PAYING FOR RENT? _____

HOW LONG HAVE YOU LIVED AT YOUR PRESENT ADDRESS? _____

HAVE YOU OR YOUR SPOUSE EVER BEEN EVICTED OR HAD EVICTION PROCEEDINGS FILED AGAINST YOU? _____ IF YES, WHEN? _____

HAVE YOU OR YOUR SPOUSE EVER BEEN ARRESTED AND/OR CHARGED WITH A FELONY OR AGGRAVATED MISDEMEANOR? _____ IF YES, WHEN? _____

HAVE YOU OR YOUR SPOUSE EVER BEEN A USER OR ADDICT OF ANY ILLEGAL AND/OR CONTROLLED SUBSTANCE OR BEEN ARRESTED AND/OR CHARGED WITH ANY CRIME RELATED TO THE USE, POSSESSION OR DISTRIBUTION OF ANY ILLEGAL OR CONTROLLED SUBSTANCE? _____ IF YES, WHEN? _____
EXPLAIN: _____

HAVE YOU OR YOUR SPOUSE EVER BEEN ON PROBATION OR PAROLE SUPERVISION? _____
IF YES, WHEN? _____ EXPLAIN: _____

IF YES, WHO IS YOUR PROBATION OFFICER? _____

IF YOU LIVED AT YOUR PRESENT ADDRESS FOR LESS THAN ONE YEAR:

PREVIOUS ADDRESS: _____

PREVIOUS LANDLORD NAME: _____ PHONE: _____

WHAT WERE YOU PAYING FOR RENT? _____

HOW LONG DID YOU RESIDE AT THIS ADDRESS? _____

I AUTHORIZE THE VERIFICATION AND SHARING OF THIS INFORMATION INCLUDING MY EMPLOYMENT, BANK ACCOUNTS, RENTAL HISTORY & CREDIT HISTORY (INCLUDING A CREDIT BUREAU REPORT). I UNDERSTAND THAT IF I AM ACCEPTED AND FAIL TO COMPLETE THIS TRANSACTION BY PROMPTLY SIGNING THE LEASE, ANY DEPOSIT PAID WILL BE FORFEITED. I FURTHER UNDERSTAND THAT IF ANY OF THE ABOVE INFORMATION IS FOUND TO BE INTENTIONALLY FALSE, ANY RENTAL AGREEMENT BECOMES VOID AND WILL BE SUFFICIENT REASON FOR EVICTION AND LOSS OF SECURITY DEPOSIT. I CLEARLY UNDERSTAND THAT PHOENIX HOUSING, L.C. HAS A NO SMOKING POLICY FOR ALL PROPERTY MANAGED BY THE COMPANY.

APPLICANT: _____ DATE: _____

SPOUSE: _____ DATE: _____