

Application for Occupancy (Page 1)

| Property Name: | Unit Typo | | Pont ¢ | |
|------------------------------------|--------------------------------|-------------------------------------|--------------------|--|
| Leasing RepMove-In [| | Unit Type | | |
| How did you hear about us? Newspa | | | | |
| Applicant Information ☐ Single ☐ | | | | |
| Last Name | | | | |
| Maiden or Former Names | | | | |
| SSN (Social Security Number) | | | _ | |
| Email Address | | | | |
| Daytime Phone | | | | |
| Roommates? Yes No Name | | _ | · | |
| #2 | | | | |
| SPOUSE Last Name | | | | |
| Maiden or Former Names | | | | |
| SSN (Social Security Number) | | Date of Birth _ | | |
| CHILDREN Yes No Will your ch | ildren live at the property wh | nich you are ap | plying? 🗌 Yes 🔲 No | |
| Name: Age: Name: _ | Age: | Name: | Age: | |
| Residential Information – Include | information for the last 3 ye | ears . Use 2 nd p | age if needed. | |
| PRESENT ☐ Rent ☐ Own ☐ Fan | nily Dates There _ | | Rent \$ | |
| Street Address | | | Apt | |
| City | State | | Zip | |
| Apartment/Landlord Name | | Phone | | |
| PRIOR | nily Dates There _ | | Rent \$ | |
| Street Address | | | Apt | |
| City | | | | |
| Apartment/Landlord Name | | Phone | | |
| OTHER | nily Dates There | | Rent \$ | |
| Street Address | | | | |
| City | | | | |
| Apartment/Landlord Name | | | | |
| Fundament and Income Inform | | | | |
| Employment and Income Infor | | Mar | - H- h - l | |
| Employer | | | | |
| | | City State Zip Supervisor Phone | | |
| Start Date Supervisor Name | ÷ | _ Superviso | r Priorie | |
| SPOUSE Employer | Position | Moi | nthly Income \$ | |
| Address | | | | |
| Start Date Supervisor Name | e | _ Superviso | r Phone | |
| OTHER INCOME | | | | |
| Source of Income | | Moi | nthly Income \$ | |

Application for Occupancy (Page 2)

| Applicant Information (Please enter again | າ in case Page 1 | I and Page 2 o | | |
|--|--|--|---|--|
| Last Name | First | | SSN | |
| Additional Information | | | | |
| Have you ever willingly refused to pay rer | nt? If so, | If so, to whom and why? | | |
| Have you ever been evicted? | If so, | If so, to whom and why? | | |
| Have you ever been arrested or convicted charge? | | · | • | |
| Emergency Contact | Relations | ship | Phone | |
| Character Reference | Relations | ship | Phone | |
| Character Reference | Relations | ship | Phone | |
| Driver's License #Bank _ | State of | Issue | | |
| Make of Vehicle: Model: | Color: | Year: | Plate#/State:/ | |
| Do you have a pet? Y N If Yes: What ty | | | | |
| How many pets? Pet weight (s) | | | | |
| Roommate Information History - If yo | | | | |
| Name of Roommate(s) also on lease Curr | ent Address | | | |
| Name of Roommate(s) also on lease Prior | r Address | | | |
| Name of Roommate(s) also on lease Othe | er Address | | | |
| Failure to provide complete information references, will delay processing. | | • | • | |
| Applications will not be proceed application must be signed by all considered by the Landlord. Acceptance on the binding upon Landlord until notified by reserve a unit for the applicant. | adults who will of this application | I occupy the on, and any m | apartment before it can bonies deposited herewith, i | |
| A non-refundable screening fee of will be collected at this time to process | | | | |
| By signing, the applicant recognizes that information is obtained from credit bureaus public records. This inquiry includes info credit and mode of living. This application misrepresentation or insufficient information | s, landlords and ormation as to y ation may be | d employers, the your characte disapproved | nrough interviews and r, general reputation, as a result of any | |
| Applicant's Signature Date | Spouse | e's Signature | Date | |
| шат | I FOURTIES GR | OUD | | |

HALL EQUITIES GROUP
IRONWOOD COURT, PARK WEST GARDENS, & PARK WEST TOWN HOMES

1501 George Williams Way, Office Lawrence, KS 66047

Phone: (785) 840-9467 Fax: (785) 840-9648 Email: Ironwood@hallequitiesgroup.com