

WASATCH FRONT

PROPERTY MANAGEMENT, LLC

APPLICATION TO RENT

PHONE (801) 649-3983

FAX (801) 606-2784

EMAIL: TiffanyMHMG@AOL.com

APPLICANT INFORMATION:

Please submit with application fee of \$30 per Adult

LAST NAME		FIRST NAME		MIDDLE INT.	SOCIAL SECURITY NUMBER
					- -
OTHER NAMES USED IN THE LAST 10 YEARS					PHONE NUMBER
					() -
DATE OF BIRTH	DRIVER'S LICENSE NO.	STATE	EXPIRATION	ALT. PHONE NUMBER	
/ /				() -	

RESIDENCE HISTORY:

PRESENT ADDRESS				CITY	STATE	ZIP
MOVE-IN DATE	MOVE-OUT DATE	OWN OR RENT?	IF RENT, FIRST & LAST NAME OF LANDLORD		LANDLORD PH NUMBER	
					() -	
PREVIOUS ADDRESS				CITY	STATE	ZIP
MOVE-IN DATE	MOVE-OUT DATE	OWN OR RENT?	IF RENT, FIRST & LAST NAME OF LANDLORD		LANDLORD PH NUMBER	
					() -	

EMPLOYMENT/INCOME INFORMATION:

CURRENT EMPLOYER	ADDRESS			CITY/STATE
POSITION	DATES OF EMPLOYMENT	RATE OF PAY	PHONE NUMBER	
		\$	() -	
OTHER SOURCE OF INCOME	AMOUNT OF OTHER INCOME			CURRENT GROSS MONTHLY INCOME
	\$			\$
PREVIOUS EMPLOYER	ADDRESS			CITY/STATE
POSITION	DATES OF EMPLOYMENT	RATE OF PAY	PHONE NUMBER	
		\$	() -	

OTHER PERSONAL INFORMATION:

LIST ALL FINANCIAL OBLIGATIONS (CREDITOR NAME & MONTHLY PAYMENTS)					
1. _____	Monthly Pymt \$ _____	2. _____	Monthly Pymt \$ _____		
3. _____	Monthly Pymt \$ _____	4. _____	Monthly Pymt \$ _____		
5. _____	Monthly Pymt \$ _____	6. _____	Monthly Pymt \$ _____		
AUTOMOBILE MAKE & MODEL	YEAR	COLOR	STATE	LICENSE PLATE #	
AUTOMOBILE MAKE & MODEL	YEAR	COLOR	STATE	LICENSE PLATE #	
DO YOU HAVE ANY OUTSTANDING JUDGMENTS, LIENS, AND/OR COLLECTIONS? IF YES, PLEASE LIST BELOW:					
HAVE YOU EVER BEEN CONVICTED OF A FELONY? IF YES, PLEASE EXPLAIN BELOW:					
HAVE YOU EVER FILED FOR BANKRUPTCY? IF SO, WHEN?			HAVE YOU EVER BEEN EVICTED OR ASKED TO MOVE? IF SO, PLEASE EXPLAIN BELOW:		
DO YOU HAVE ANY PETS? IF SO, PLEASE LIST ALL BELOW:					

ACKNOWLEDGEMENT:

I hereby make application to rent the premises located at: _____ for \$ _____ per month, security deposit of \$ _____. I am depositing a \$30 application fee (per adult) which will be used to pay for a credit check and any other expenses incurred as necessary to verify information supplied herewith. I hereby certify that the above information is true and correct to the best of my knowledge. I understand that any false information supplied on this form may cause this application to be disapproved and the application fee to be forfeited. It is also understood that while approval of this application shall not constitute a contract to rent the aforementioned premises, I agree to sign a rental agreement upon such approval within 3 business days. My prepaid deposit of \$ _____ paid by _____ shall be immediately refunded in full if this application is not approved; non-refundable if application is approved but applicant fails to occupy the premises or if applicant fails to provide necessary information to complete approval. I hereby give permission to employers, rental agents, and bill paying histories, etc. to release information which might influence the approval of this application to the Landlord (or representative) of the property. The credit and criminal history report will be obtained through Western Reporting. I authorize permission that a copy of this may be treated as an original.

Signature of Applicant

Printed Name

Date