

APPLICATION FOR LEASE

_____ (property address)

(Please complete all requested information)

APPLICANT INFORMATION			
Name	Applicant #1	Applicant #2	
Social Security #			
Phone Number			
Additional Tenants' Names			Age
PREVIOUS RENTAL HISTORY FOR LAST THREE YEARS (starting with current residence)			
Address City, ST ZIP	Rent Period	Landlord/Manager	Phone Number
EMPLOYMENT HISTORY FOR LAST TWO YEARS (Applicant #1)			
Employer / Supervisor	Phone Number	Position	Employment Period
EMPLOYMENT HISTORY FOR LAST TWO YEARS (Applicant #2)			
Employer / Supervisor	Phone Number	Position	Employment Period
REFERENCES -- other than relatives (Applicant #1)			
Name	Phone Number	Address City, ST ZIP	# of Years Known
REFERENCES -- other than relatives (Applicant #2)			
Name	Phone Number	Address City, ST ZIP	# of Years Known
CREDIT REFERENCES			
Name	Phone Number	Address City, ST ZIP	

Signing below gives Signature Realty Services, LLC, and its representatives permission to contact those named to verify applicants' recent financial responsibility & credit history and care for rental properties while being tenants. The undersigned understand this application does not constitute a rental agreement. The information on this form shall not be distributed without undersigned's prior written consent.

Applicant #1 Signature

Date

Applicant #2 Signature

Date

Printed Name

Printed Name

Return to: Signature Realty Service, LLC, PO Box 8024, Bloomington, IN 47407, fax to 815.301.3197, or scan/email to mike47408@gmail.com