

For Office Use Only:
 Apt # _____ Lease Start Date _____
 Rent _____ Deposit _____
 Manager Signature _____

**Wellington at 2529/GPX Realty Partners
 Rental Application**

Name: (Last) _____ (First) _____ (Middle) _____
 Social Security Number: _____
 Date of Birth: _____ Driver License No.: _____
 Home phone: _____ Email address: _____
 Current Address: _____
 City: _____ State: _____ Zip: _____
 Daytime phone: _____ Cell phone: _____
 Month & year moved in: _____ Reason for leaving: _____
 Landlord Name: _____ Landlord phone: _____
 Monthly Rent: _____

Employment

Employment Status: Part Time ___ Full Time ___ Retired ___ Temporary ___ Gross monthly salary: _____
 Title/Position: _____
 Current employer: _____ Employer phone number: _____
 Employer address: _____
 Employment dates: _____ Supervisor: _____

Financial Reference

Bank	Location	Account Number/Type	Telephone
1.	_____	_____	_____
2.	_____	_____	_____

Additional Occupants

1. Name: _____ Age: _____
 1. Name: _____ Age: _____
 1. Name: _____ Age: _____

Auto Information

1. Make/Model/Year: _____
 2. Make/Model/Year: _____
 Have you ever been sued for non-payment of rent? _____
 Have you ever filed for bankruptcy? _____
 Have you ever been evicted? _____

I hereby grant management the right to process this application for the purpose of obtaining a rental lease. In compliance with the Fair Credit Reporting Act, this notice is to inform you that a credit report will be obtained and additional information will be obtained through employers, banks, landlords & financial companies. Applicant hereby represents that all information is true correct & complete.

I/WE give a deposit in the amount of \$ _____ on Apartment Number: _____
 In addition to \$ _____, which is the non refundable credit check fee.
 The balance of the Deposit in the amount of \$ _____ is due by: _____
 If balance of deposit is not received by this date, Landlord will attempt to re-rent the apartment and the Deposit shall be forfeited.

Upon execution of the Lease, the Deposit shall be included in the Security Deposit. Applicant understands, in the event Applicant cancels the Rental Application within 3 days, the Deposit shall be refunded. The credit check fee will not be refunded. Should Applicant cancel the Rental Application after the 3rd day, the Deposit will not be refunded.

Applicant Signature: _____ **Date:** _____