



Real Estate, Inc.

# RENTAL APPLICATION

200 Smokerise Dr, Suite 201  
Wadsworth, OH 44281  
(330) 335-2505 \* Fax (330) 334-5231

Address Applying For: \_\_\_\_\_

Monthly Rent: \_\_\_\_\_

Date: \_\_\_\_\_

Complete both sides of form; Incomplete applications may not be processed. Return with \$30 per applicant non-refundable fee, copy of ID and proof of income.

## PERSONAL INFORMATION

**Applicants Full Name:** \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Present Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ ST: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Co-Applicants Full Name:** \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Present Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ ST: \_\_\_\_\_  
Cell Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

Full names of all other residents	Relationship	Birth Date

## RESIDENCE HISTORY

### Applicant:

**Do you:** Own \_\_\_ Rent \_\_\_ **Monthly Payment \$:** \_\_\_\_\_ **Reason for moving:** \_\_\_\_\_  
Dates From: \_\_\_\_\_ To: \_\_\_\_\_ Date Lease Expires: \_\_\_\_\_  
Was Notice Given? \_\_\_\_\_ Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Previous Landlord: \_\_\_\_\_ Telephone #: \_\_\_\_\_

### Co-Applicant:

**Do you:** Own \_\_\_ Rent \_\_\_ **Monthly Payment \$:** \_\_\_\_\_ **Reason for moving:** \_\_\_\_\_  
Dates From: \_\_\_\_\_ To: \_\_\_\_\_ Date Lease Expires: \_\_\_\_\_  
Was Notice Given? \_\_\_\_\_ Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

**Previous Address:** \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
Previous Landlord: \_\_\_\_\_ Telephone #: \_\_\_\_\_

## EMPLOYMENT HISTORY

**Applicant Employer:** \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Gross Monthly Salary: \_\_\_\_\_

**Co-Applicant Employer:** \_\_\_\_\_ Dates From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_  
Position: \_\_\_\_\_ Supervisor: \_\_\_\_\_ Gross Monthly Salary: \_\_\_\_\_

**Other Income:** Amount \$ \_\_\_\_\_ Source: \_\_\_\_\_  
Amount \$ \_\_\_\_\_ Source: \_\_\_\_\_

## REFERENCES

**Personal References:** (not related to applicants)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_

**Emergency Contacts:** (closest living relatives/per applicant)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Present Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone # \_\_\_\_\_  
 Present Address: \_\_\_\_\_ City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

## ADDITIONAL INFORMATION

Animals? \_\_\_\_\_ Describe #, Breed, Weight: \_\_\_\_\_

Vehicle Make/Model	Year/Color	License No./State

**Applicant Bank:** \_\_\_\_\_ City: \_\_\_\_\_  
 Checking Acct # \_\_\_\_\_ Savings Acct # \_\_\_\_\_

**Co-Applicant Bank:** \_\_\_\_\_ City: \_\_\_\_\_  
 Checking Acct # \_\_\_\_\_ Savings Acct # \_\_\_\_\_

Has Applicant/Co-Applicant/Resident Ever:	If yes, please describe:	
Applied with/rented from us before?	No ___	Yes ___ _____
Been sued for non-payment of rent?	No ___	Yes ___ _____
Been evicted/foreclosed/asked to move?	No ___	Yes ___ _____
Broken a rental agreement or lease?	No ___	Yes ___ _____
Been sued for damages to property?	No ___	Yes ___ _____
Been named as defendant in law suit?	No ___	Yes ___ _____
Been convicted of a crime?	No ___	Yes ___ _____
Declared bankruptcy?	No ___	Yes ___ _____

## AUTHORIZATION

I hereby make application to lease a rental premises and certify the information provided is correct and true. I authorize Wadsworth Real Estate, Inc. or its assigns to contact/utilize any information or references listed, authorize references to release information, and agree there are no restrictions regarding what may be discussed/revealed, and understand this information could be used for collection purposes. I agree that credit history, eviction, public records, criminal background, and landlord reference checks may be performed, and understand it may appear as an inquiry on my file. Inconclusive/questionable information may result in a request for additional documentation. Furthermore, I understand management may screen numerous applicants prior to approval. I agree application: is subject to approval by Landlord in its sole discretion; does not constitute any oral or written agreement on the part of Wadsworth Real Estate, Inc.; is valid for only 30 days; withdrawal may result in loss of deposits. Deposit and/or lease may be required immediately upon approval to hold premises. False information is grounds for denial.

**Applicant Print Name:** \_\_\_\_\_ **Co-Applicant Print Name:** \_\_\_\_\_  
**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Co-Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## OFFICE USE ONLY - DO NOT WRITE BELOW

<b>NOTES:</b>	<b>APPLICATION STATUS:</b>
	APPROVED: _____ DECLINED: _____
	DATE: _____ BY: _____
	APPLICANT NOTIFIED: _____