

IVY PARK APARTMENTS

RENTAL APPLICATION

Phone #: (225) 751-5811 Fax #: (225) 751-4547

Date: _____ Apartment #: _____
Requested move in date: _____ Lease Term: _____
Rental Amount: _____ Specials: _____

NOTE: All persons 18 years or older must complete a separate application.

\$50.00 APPLICATION FEE PER APPLICANT (Non-Refundable)

****PLEASE COMPLETE THE FOLLOWING QUESTIONS REGARDING THE APPLICANT****

Name: _____
(last name) (first name) (middle name)
SS#: _____ DOB: _____ Driver's Lic.#: _____ State: _____
Email Address: _____

Address

Present Address: _____
(street) (city) (state) (zip code)
Phone #: _____ Cell: _____
Present Landlord: _____ Phone #: _____ Monthly Rent: _____
Reason for leaving: _____
Previous Landlord: _____ Phone: _____
(if less than 2 yrs.)
Reason for leaving: _____

Employment

Employer: _____ Position: _____ Monthly Salary: _____
Address of Employer: _____ Phone #: _____
Employment: Full-Time _____ Part-Time _____ Not Employed _____
Length of Employment: _____ Supervisor: _____ Phone#: _____
Previous Employer: _____ Position: _____ Salary: _____
(if less than 2 years)
Address of Employer: _____ Fax#: _____
Length of Employment: _____ Supervisor: _____ Phone#: _____
If you have no salary, from what source will you pay your rent? _____
Have you ever been convicted or pled guilty to a crime? _____

****PLEASE COMPLETE THE FOLLOWING QUESTIONS REGARDING YOUR SPOUSE OR
GUARANTOR****

Name: _____
(last name) (first name) (middle name)
Present Address: _____
(street) (city) (state) (zip code)
Phone #: _____ Cell #: _____
Present Landlord: _____ Phone #: _____ Monthly Rent: _____
Reason for leaving: _____
Previous Landlord: _____ Phone#: _____
(if less than 2 yrs.)
Reason for leaving: _____
SS#: _____ DOB: _____ Driver's Lic.#: _____ State: _____
Employer: _____ Supervisor: _____ Phone#: _____

Address of Employer: _____ Fax#: _____

Position: _____ Salary: _____ Length of Employment: _____

Employment: Full-Time _____ Part-Time _____ Not Employed _____

If you have no salary, from what source will you pay your rent? _____

Have you ever been convicted or pled guilty to a crime? _____

****OTHER PERSONS WHO WILL OCCUPANY THIS ADDRESS WITH YOU****
(Minor children, dependents, etc.)

Name: _____ Relationship: _____ Age: _____ Sex: _____

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Name: _____ Relationship: _____ Age: _____ Sex: _____

Do you have pets? _____ How many? _____ What kind? _____ Weight? _____

Have any of the above occupants ever been convicted of a crime? _____

How many vehicles will you keep at this address? _____

Make of Car: _____ Year: _____ License Plate #: _____ Color: _____

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****IN CASE OF AN EMERGENCY, PLEASE NOTIFY****

Name: _____ Relationship: _____

Address: _____ Phone: _____

By signing below, I authorize Ivy Park Apartments to make inquiries through the Credit Bureau and/or from my employer and other references that I have supplied on this Rental Application.

Applicant has deposited herewith the sum of \$ _____ with Ivy Park Apartments which is hereby acknowledged, to be used at Owner/Agent's discretion and to be refunded as hereinafter provided in the Lease Agreement. In the event this application is approved, and applicant fails or refuses to enter into the contemplated Lease Agreement, Owner/Agent shall retain the said deposit as liquidated damages to cover the cost of taking and processing this application, removing the property from the market, and holding same for applicant. In the event this application is not approved by the Owner/Agent, this deposit will be promptly returned to the applicant.

This application is made with the understanding that it is subject to acceptance by the Owner and subject to execution by an Officer of said company and delivery of a Lease Agreement covering said premises. Please allow a minimum of 3-5 days to process your application for both credit and character references.

The above information is correct to the best of my knowledge. I have no objection to inquiries for the purposes of verification of the above statements. This includes a police background check. It is understood that the above information will be held in strict confidence.

Contingencies: _____

Applicant

Date

Applicant

Date