

Property Address: _____ Monthly Rent: _____ Move-In Date: _____

\$40 Application Fee Per Applicant. Fees are non-refundable.

Applicant's Name		Soc. Security #	Drivers License #	Date of Birth
Spouse's Name		Soc. Security #	Drivers License #	Date of Birth
# of Occupants	Names of Occupants			
Cell Phone #	Home Phone #		Work Phone #	
Emergency Contact			Emergency Contact Phone #	
RESIDENT HISTORY				
Current Residence		City, State ZIP	Date From	Date To
Owner/Agent		Phone #	Rent/Mtg. \$	
Why Moving?				
Previous Residence		City, State ZIP	Date From	Date To
Owner/Agent		Phone #	Rent/Mtg. \$	
EMPLOYMENT HISTORY				
Employer	Address	Title	Date From	Date To
Supervisor's Name		Phone #	Monthly Salary \$	
Previous Employer	Address	Title	Date From	Date To
Supervisor's Name		Phone #	Monthly Salary \$	
Spouse's Employer	Address	Title	Date From	Date To
Supervisor's Name		Phone #	Monthly Salary \$	
Spouse's Previous Employer	Address	Title	Date From	Date To
Supervisor's Name		Phone #	Monthly Salary \$	
HAVE YOU EVER:				
Filed Bankruptcy? Yes <input type="checkbox"/> No <input type="checkbox"/> Been evicted or left owing money to a landlord? Yes <input type="checkbox"/> No <input type="checkbox"/> Refused to Pay Rent? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Been arrested for sale or use of illegal drugs? Yes <input type="checkbox"/> No <input type="checkbox"/> Been charged with a felony? Yes <input type="checkbox"/> No <input type="checkbox"/>				
Will there be any smokers living in the residence? Yes <input type="checkbox"/> No <input type="checkbox"/>				
A \$750 decontamination fee will apply to the security deposit claim upon move-out if smoke odor and/or damages present.				
Do you have any water-filled furniture?		Do you have any pets?		
Yes <input type="checkbox"/> No <input type="checkbox"/> (If yes, proof of insurance is required.)		No <input type="checkbox"/> Yes <input type="checkbox"/> How many _____ Breed/Type _____		
Year & Make of Vehicle(s) _____ Vehicle License #'s _____				

I affirm that all the information on this application is true, accurate, complete and correct and authorize property manager to verify all information contained on the application and conduct a full background check including but not limited to credit, bank account, employment, eviction, criminal background checks and authorize property manager to contact any persons or companies listed on the application. Once you have been notified of your approval, you must place (at a minimum) a holding deposit (guaranteed funds), equal to at least one-month's rent within 24 hours of your approval notification. Once approved and payment of the holding deposit is paid your holding deposit is non-refundable. In the event that you fail to enter into the lease agreement on this date, you shall forfeit these funds as liquidated damages. If you do not comply with this requirement, we may rent the property you applied for to someone else, and your process fee is non-refundable. After lease closing, your holding deposit will be transferred as your security deposit, which is \$100 less than the rental amount. The \$100 that is left is an administrative fee paid to Mark Busher & Associates, Inc. at lease closing.

Applicant's Signature _____

Date _____

Co-Applicant's Signature _____

Date _____

ONCE YOUR APPLICATION HAS BEEN
APPROVED, THE HOLDING DEPOSIT IS DUE
WITHIN (48) HOURS (INCLUDING WEEKENDS)
OR ELSE THE APPLICATION WILL BE NULL
AND VOID. IF DEPOSIT IS NOT PAID WITHIN
(48) HOURS, YOU WILL HAVE TO RE-APPLY.

PLEASE MAKE NOTE THAT ALL APPLICATION FEES
MUST BE PAID IN CASH AND MUST BE RECEIVED
BY OUR OFFICE BEFORE WE CAN RUN YOUR
APPLICATION.

THE HOLDING DEPOSIT AND THE FIRST MONTH'S
RENT MUST BE PAID IN CASH, MONEY ORDER OR
CASHIER'S CHECK.

THANK YOU VERY MUCH
MARK BUSHER & ASSOCIATES, INC

I understand and acknowledge the above
information. Please initial.
