Custom Property Services, LLC Rental Application

All applicants over the age of 18 years must complete their own application. Thank You.

The undersigned hereby	makes application to rent the unit	t located at		
Beginning	, and ending	, at a monthly	rental amount of \$	00.
	Personal	Information		
Applicant's Full Name:			Day Phone:	
Date of Birth:	Social Security Number:	email	address:	
Do you have a Co-Applica	ant who is not your spouse?: 🗆 \	′es □ No		
If yes, Co-Applicant's Nar	me(s)			
If married, Spouse's Full	Name:			
Date of Birth:	Social	Security Number:		
Number of Dependents:_	Dependent(s) !	Name(s) and Age(s):		
Name, Address, and Pho	ne Number for Emergency Contac	rt (person not living in ເ	ınit) :	
you have a pet in the "ot	Yes □ No Number of ea her" category, please tell what ty	pe of animal:		<u></u>
Has your pet completed a	an obedience training class? \square Y	es No When?	Whe	re?
Your Student Number:		School:		
Your Driver's License Nur	mber:	Sta	:e:	_
If married, Spouse's Drive	er's License Number:		State:	
Your Vehicle Make/Model	:	Year:	License Plate:	
Second Vehicle Make/Mod	del:	Year:	License Plate:	

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		K	entai iniormatioi		
* Current Address	•				
Address:		Apt.#	City/State:		Zip Code:
Month/Year Moved I	n:		Lease Ex	piration:	
)
				, ,	,
* Previous Addre	ss (If Within the	e Last Three Year	rs)		
Address:		Apt.#	City/State:		Zip Code:
Month/Year Moved I	r Moved In:Lease Expiration:				
Reason For Leaving:		_			
Landlord:				Day Phone #: ()
		Emplo	yment Informati	ion	
* Your Status:	☐ Employed I☐ Retired	Full Time (40 ho	ours/week) ☐ Unemployed		art Time (hours/wk) Student
Employer and Addres	SS:				
Date Employed:			_Job Title:		
Supervisor's Name:_				Phone Number: ()
Salary: \$	per	If emp	ployed by the abov	ve for less than six ।	months please give your
previous employer's	name:				
Address:		Daytime phone number:			
* Spouse Status (if not married	l disregard) □	Employed Full Tin	ne (40 hrs/week)	
☐ Employed	l Part Time (hrs/wk)	☐ Unemployed	☐ Student	□ Retired
Employer and Addres	ss:				
Date Employed:			_Job Title:		
Supervisor's Name:_				Phone Number: ()
Salary: \$	lary: \$per If employed by the above for less than six months please give your				
previous employer's	name:				

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Financial Information

If there are other sources of income you would like us to consider, or you are unemployed, please list income, source and person (banker, employer, social security, housing assistance, etc.) whom we could contact for confirmation. Please provide management with printed proof of any assistance of Social Security, Veteran's Benefits, and the like. You do not have to reveal alimony, child support or spouse's annual income unless you want it considered on this application.

Amount(s): \$	Source(s):	
Amount(s): \$	Source(s):	
	Character Information	
Have you ever:		
1. Been evicted from tenancy? ☐ No	☐ Yes If yes, when:	
2. Been convicted of a felony? ☐ No	☐ Yes If yes, explain:	
Please give any additional information t If management has any questions abou		umbers where you can be reached:
• • •		umbers where you can be reached.
	nation. They will be required to si	ncial assistance to pay your rent, you gn a guaranty agreement. As such, a
Name(s):		
Social Security Number(s):		
Address:	City & State:	Zip:
Daytima Phona Number	Evening Phone Nu	umbori

PLEASE READ & SIGN

I/We hereby apply to lease the above described premises for the term and upon the conditions above set forth and agree that the rental amount is to be payable the first day of each month in advance. I/We warrant that all statements above set forth are true, however, should any statement made above be a misrepresentation or not a true statement of facts, \$100.00 of the deposit will be retained to offset the cost, time and effort in processing this application and the application will be denied.

Any such misrepresentation or false statement will constitute a default under the lease and will entitle lessor to termination of the lease if such misrepresentation or false statement is not discovered by lessor until after parties enter into the lease. This paragraph shall be incorporated into any lease entered into between lessor and lessee.

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nce of this application, this deposit sheare to execute a lease before possisiness banking days after being ges, actual damages being difficult if effort in processing the application including the property in question off of yed and accepted by the owner or age	session is given and to pay the balance notified of acceptance or the deposit not impossible to ascertain. The deposit will cluding making necessary investigation of f the rental market and not leasing the same
a computer-generated credit report a is with whom I/we may be acquainted haracteristics and mode of living. I/We	vestigative consumer report may be prepared as well as personal interviews with employers in this inquiry includes information as to be understand that I/we may have the right to l, detailed information about the nature and
e for processing this application, an inv	vestigative criminal background check may b
knowledge, is true and correct.	
	Date:
	Data
	nce of this application, this deposit sharee to execute a lease before posisiness banking days after being ges, actual damages being difficult if effort in processing the application incoolding the property in question off of yed and accepted by the owner or age amages by reason of non-acceptance, a for processing this application, an invalous acceptance of the property of the processing this application, and invalous effort of the processing this application. If we have acquainted the processing this application and the processing this application, and invalous effort processing this application.