## **Residential Lease Application**

TO THE APPLICANT: We thank you for your application. Please assist us in the processing your application by clearly completing all of the information requested.

Address of Property:		
Desired move in date:		_Lease term:
	APPLICANT'S INF	FORMATION
Full Name of Applicant:		Date of Birth
SS#:	DL# & State: _	
Email:		Mobile phone
Full Name of Co-applicant:		Date of Birth
SS#:	DL# & State: _	
Email:		Mobile phone
Other residents:	Age:	Relationship:
	<del></del>	
Applicant's Present Address:		
Applicant's Present Address: Present Home Phone Number:		
Applicant's Present Address: Present Home Phone Number: Own: Rent:	Other:	
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence:	Other:	Amount of rent:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence:	Other:	Amount of rent:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence: Reason for Leaving: Name of Present Landlord:	Other:	Amount of rent:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence: Reason for Leaving: Name of Present Landlord: Applicant's Previous Address:	Other:	Amount of rent: Phone:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence: _ Reason for Leaving: Name of Present Landlord: Applicant's Previous Address: Previous Phone Number:	Other:	Amount of rent: Phone:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence: Reason for Leaving: Name of Present Landlord: Applicant's Previous Address: Previous Phone Number: Own: Rent:	Other:	Amount of rent: Phone:
Applicant's Present Address: Present Home Phone Number: Own: Rent: Length of Time at this residence: _ Reason for Leaving: Name of Present Landlord: Applicant's Previous Address: Previous Phone Number:	Other:	Amount of rent:

Unemployed

Self-employed Retired Student

Employed Full-time

**Employed Part-time** 

Employed by:		Phone:			
Address:					
Position held:	Department:				
Present income:	Supervisor:				
How long have you been employed	with the compa	any?			
If student, Name and Address of So	chool:		· · · · · · · · · · · · · · · · · · ·		
Co-applicant's Present Address: Present Home Phone Number:					
Own: Rent:	Other:				
Length of Time at this residence: _ Reason for Leaving:					
Name of Present Landlord:		Phone:			
Co-applicant's Previous Address:_					
Previous Phone Number:					
Own: Rent: Length of Time at this residence: _	Other:	Amount of ront			
Reason for Leaving:		Airiodilit oi reilit.			
Reason for Leaving:Name of Previous Landlord:		Phone:			
Co-applicant's Present Employmer Employed Full-time Employed Employed by:	Part-time U	Inemployed Self-employe			
Position neid:	De	partment:			
Present income:How long have you been employed	S S	supervisor:			
If student, Name and Address of So					
BAN	IKING AND CR	EDIT REFERENCES			
Bank:	Account #	<b>#</b> :	· · · · · · · · · · · · · · · · · · ·		
Branch address:					
Bank:					
Branch address:					
		ETS			
Do you have pets? Y / N Ho	ow many?	What kind?			
Breed	Weight				
OTHER INFORMATION					
Vehicles owned:					
Make/Model:	Year:	Color: Tag #	:		

Make/Model:	_Year:	Color:	_ Tag #:		
List any other vehicles that will be on the premises:					
Make/Model:	_Year:	Registration #:			
Have you or anyone living in yo	ur household e	ever:			
<ol> <li>Been convicted of a felony</li> <li>Been convicted of a sex c</li> <li>Filed bankruptcy?</li> <li>Been evicted from a home</li> </ol>	rime?	Yes: Yes: Yes: ed? Yes:	No:		
Name of nearest relative not livi	ing with you:				
Name:		Relationship:			
Address:			<del>-</del>		
Phone #:					
Personal Reference: Name:					
Address:		Phone #:			
In case of emergency, notify:			_Relationship:		
Phone #:	Address: _				
Applicant has deposited herewith					
bearing the identification numbers receipt of which is hereby acknow					
to be refunded hereinafter provide	· ·	• .	, , ,		
If applicant does not supply all nec forty-eight (48) hours of making th this application with no further obli	cessary informatis	tion required for proc ey to NOLA Propertion	essing this application within es reserves the right to reject		
Applicant's initials		Applicant's initials			

deposit of \$ as liquidated d	proval, Key to NOLA Properties shall retain the said amages to cover the cost of taking and processing this market and holding same for applicant. Key to NOLA
Applicant's initials	Applicant's initials
information provided herein is true, correct and	
Key to NOLA Properties may address this author	orization to any party named in this application.
that false or incomplete information may constit	feiture of deposits and may constitute a criminal
This application is made with the understanding property. Please allow 2 to 4 working days to p	g that it is subject to acceptance by the owner of the process this application.
discriminate on the basis of race, color, religion or disability. We comply with the letter and spiri	w. No qualified person will be denied housing or
Application fee of \$25.00 per lease applicant du	ue with application and is non-refundable.
Comments:	
PLEASE READ CAR	REFULLY BEFORE SIGNING
Applicant's printed name:	SS#:
Applicant's signature:	Date:
Co-applicant's printed name:	SS#:
Co-annlicant's signature:	Date:

