

## RENTAL CREDIT SERVICES

Application for Occupancy

Kevin and Sharon Rodgers  
The Rodgers Team  
2836 N Power Rd #114  
Mesa, AZ 85215

Property Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Date: \_\_\_\_\_ Desired Date of Occupancy: \_\_\_\_\_ Lease Term: \_\_\_\_\_

Name of Roommate (S): \_\_\_\_\_ Full Time Student Y\_\_ N\_\_

**FAILURE TO COMPLETE ALL SECTIONS AND SIGN WILL RESULT IN  
DELAY OR DENIAL OF THIS APPLICATION**

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Spouse: \_\_\_\_\_ SSN: \_\_\_\_\_

Your home phone#: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Number of Occupants: \_\_\_\_\_ Pets: \_\_\_\_\_ Small Dog Only

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married

In case of emergency, Notify: \_\_\_\_\_ Phone #: \_\_\_\_\_

How did you hear about us: Yard Sign \_\_\_\_\_ Flyer \_\_\_\_\_ Internet \_\_\_\_\_ Other: \_\_\_\_\_

### Residential History

1. Present Landlord/Complex Name: \_\_\_\_\_  
County: \_\_\_\_\_

Your Address: \_\_\_\_\_ Apt#: \_\_\_\_\_ City, St, Zip: \_\_\_\_\_

Landlord Phone #: \_\_\_\_\_

Dates Rented From: \_\_\_\_\_ To: \_\_\_\_\_ Rent: \_\_\_\_\_

2. Previous Landlord/Complex Name: \_\_\_\_\_  
County: \_\_\_\_\_

Your Address: \_\_\_\_\_ Apt#: \_\_\_\_\_ City, St, Zip: \_\_\_\_\_

Landlord Phone #: \_\_\_\_\_

Dates Rented From: \_\_\_\_\_ To: \_\_\_\_\_ Rent: \_\_\_\_\_

### Employment/Other Income/Financial

1. Name of Employer: \_\_\_\_\_ Position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_

2. Previous Employer: \_\_\_\_\_ Position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_

3. Spouse Employer: \_\_\_\_\_ Position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Employer Phone #: \_\_\_\_\_

Other Income: (Verification will be requested). Please list any SSI, Pension, Disability, Student Grants, and Dividends etc.

Name: \_\_\_\_\_ Amount: \_\_\_\_\_

Type of Income: \_\_\_\_\_

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Type of Income: \_\_\_\_\_

General Questionnaire – Answer all Questions

1. Have you ever been evicted? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

2. Have you ever been convicted of a crime? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

3. Number of cars: \_\_\_\_\_

A) Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

Vehicle Plate #: \_\_\_\_\_

B) Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

Vehicle Plate #: \_\_\_\_\_

4. Driver's License #: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

5. Reference/Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Reference/Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**FALSE STATEMENTS OR INCOMPLETE INFORMATION WILL BE GROUNDS  
FOR DENIAL OF THIS APPLICATION**

This application must be signed by all adults who will occupy the premises before it can be considered by the Landlord. Acceptance of this application, and any monies deposited herewith is not binding upon Landlord until approved by Landlord in writing. If approved, monies deposited with this application will be held as may be required of applicant at the time a rental agreement is secured. If approved and the rental is held for applicant for more than 7 days then the applicant withdraws the application, all monies deposited shall be forfeited to Landlord.

Non-Refundable Application Processing Fee: \_\_\_\_\_

In Compliance with the FAIR CREDIT REPORTING ACT this notice is to inform you that the processing of this application includes but is not limited to making any inquiries deemed necessary to verify the accuracy of the information herein. Including procuring consumer reports from consumer credit reporting agencies and obtaining credit information from the other credit institutions. The undersigned agrees this application and any information reports will remain the property of Credit Services, Inc.

Leasing Consultant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **LANDLORD/TENANT RIGHTS**

By signing below, you are acknowledging the receipt of the Landlord/Tenant Rights.

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date

### **CONDITIONS, COVENANTS AND RESTRICTIONS**

By signing below, you are acknowledging the receipt of the CC&R's.

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Tenant Signature

\_\_\_\_\_  
Date