

COLONIAL SQUARE



Date / Time Applied: _____ Desired date of occupancy: _____

Applicants Name: _____ Maiden Name (if any): _____

Date of Birth: _____ SSN# _____ U.S. Citizen? Yes No

Co-Applicants Name: _____ Maiden Name (if any): _____

Date of Birth: _____ SSN# _____ U.S. Citizen? Yes No

of People that will occupy the unit: Adults (age 18 & over) _____,

Children (age under 18) _____, Ages of Children: _____

Pets: Yes No description: _____

In case of emergency, notify: _____

RESIDENCE HISTORY (Last 3 years)

Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____
Area code & Number

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Landlord: _____ Phone Number: _____
Mortgage Company if buying Area code & Number

Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Landlord: _____ Phone Number: _____
Mortgage Company if buying Area code & Number

Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____
Area code & Number

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Landlord: _____ Phone Number: _____
Mortgage Company if buying

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EMPLOYMENT REFERENCES

Current Employment: _____ Phone Number: _____
Area code & Number

Address: _____ Position: _____

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Previous Employment: _____ Phone Number: _____
Area code & Number

Address: _____ Position: _____

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Co-Applicant Employment: _____ Phone Number: _____
Area code & Number

Address: _____ Position: _____

From Mo. _____ / Yr. _____ To Mo. _____ / Yr. _____

Monthly Household Income: \$ _____

BANK REFERENCES

Bank Reference: _____ Phone Number: _____

Address: _____

Acct #: _____ How Long: _____ Checking / Savings

Other Income: _____
Indicate source & amount

CREDIT REFERENCES

1. _____ Acct#: _____ Phone: _____
Area code & Number

2. _____ Acct#: _____ Phone: _____
Area code & Number

3. _____ Acct#: _____ Phone: _____
Area code & Number

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CHARACTER REFERENCES

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____
Area code & Number

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone Number: _____
Area code & Number

of Cars: _____ Applicant Driver's License#: _____

Co-Applicant Driver's License#: _____

Make: _____ Color: _____ Year: _____ Plate# _____ State: _____

Make: _____ Color: _____ Year: _____ Plate# _____ State: _____

Make: _____ Color: _____ Year: _____ Plate# _____ State: _____

This application must be signed by all who will be responsible for the unit and are listed as applicants before it can be considered. Acceptance of this application, and any monies deposited herewith, is not binding until approval is made in writing. By signing, the applicant recognizes that the owner or his/her legal agent may investigate all information shown on this application as well as obtaining information from public records regarding civil and criminal matters, and full disclosure of pertinent facts may be made to the owner. I understand that the credit report fee is non-refundable.

The Credit Report Fee is \$ _____

Applicant Signature

Date

Co- Applicant Signature

Date