

TEAM MANAGEMENT - Rental Application

Office: (847) 731-3597

Fax: (847) 731-7320

Email: Team.Management@Comcast.net

Unit Applied for: _____

Applicant

First: _____ Middle: _____ Last: _____

DOB: _____ SS#: _____

D/L#: _____ State: _____

Current Phone: () _____

Cellular #: () _____

Email: _____

Current Address Renting From:

Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ Rent: _____

Lease: Yes / No Expiration: _____

Reason for Moving: _____

Owner/Landlord: _____

Phone: () _____

Previous Address Rented From:

Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ Rent: _____

Lease: Yes / No Expiration: _____

Reason for Moving: _____

Owner/Landlord: _____

Phone: () _____

Current Employment:

Employer: _____

Address: _____

Phone: () _____

Occupation: _____

How Long? _____ Full / Part Time

Supervisor: _____

Phone: () _____

Gross Monthly Income: _____

Hourly: \$ _____ # of Hours _____

Other Income: \$ _____ Source: _____

Previous Employment:

Employer: _____

Address: _____

Phone: () _____

Occupation: _____

How Long? _____ Full / Part Time

Date: _____

Co-Applicant

First: _____ Middle: _____ Last: _____

DOB: _____ SS#: _____

D/L#: _____ State: _____

Current Phone: () _____

Cellular #: () _____

Email: _____

Current Address Renting From:

Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ Rent: _____

Lease: Yes / No Expiration: _____

Reason for Moving: _____

Owner/Landlord: _____

Phone: () _____

Previous Address Rented From:

Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ Rent: _____

Lease: Yes / No Expiration: _____

Reason for Moving: _____

Owner/Landlord: _____

Phone: () _____

Current Employment:

Employer: _____

Address: _____

Phone: () _____

Occupation: _____

How Long? _____ Full / Part Time

Supervisor: _____

Phone: () _____

Gross Monthly Income: _____

Hourly: \$ _____ # of Hours _____

Other Income: \$ _____ Source: _____

Previous Employment:

Employer: _____

Address: _____

Phone: () _____

Occupation: _____

How Long? _____ Full / Part Time

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Name and relationship of every person to live with you in the apartment:

_____	_____
_____	_____
_____	_____

Pets: _____ What kind (if yes): _____

Have you ever been evicted? Yes / No Details: _____

Any existing Judgements? Yes / No Details: _____

Ever filed Bankruptcy? Yes / No Details: _____

Ever been Foreclosed? Yes / No Details: _____

Automobiles:

#1-Registered to: _____ State: _____ Lic. Plate #: _____

Make/Model: _____ Year: _____ Color: _____ Insured by: _____

#2-Registered to: _____ State: _____ Lic. Plate #: _____

Make/Model: _____ Year: _____ Color: _____ Insured by: _____

Personal References (Name - Address - Phone # Relationship:)

#1- _____

#2- _____

#3 _____

Nearest Relative's Name: _____ Phone # () _____

Address: _____ City: _____ State: _____ Relation _____

Emergency contact (including non-payment of rent): Name: _____

Address: _____ Phone # () _____

Relationship: _____

WARNING: ANSWERS WILL BE VERIFIED VIA COURT AND CREDIT RECORDS!

I certify that the above application and the information contained therein are complete, true, and correct. I understand that this application shall be incorporated in and become part of the lease of the premises sought, and if incorrect or untrue, shall be grounds for cancellation of said lease. I hereby give TEAM MANAGEMENT full permission to verify all information supplied including employment status and income and run a credit report. I also understand that if accepted as a resident, I will pay a non-refundable deposit to TEAM MANAGEMENT to be applied toward my security deposit. The amount of said deposit to be agreed.

Signed: _____ Date: _____

Signed: _____ Date: _____

NOTICE: IF ACCEPTED, A \$35 APPLICATION FEE WILL BE ADDED TO MOVE-IN COSTS FOR PROCESSING

****YOU MUST SUBMIT PHOTO ID WITH YOUR APPLICATION****