

TEAM MANAGEMENT - Rental Application

Office – (847) 731-3597

Fax – (847) 731-7320

Unit Applied for: _____

Target Move-In date: _____

Applicant

First: _____ M Last: _____
DOB: _____ SS# _____
D/L#: _____ State: _____
Home Phone: () _____
Cellular #: () _____
Email: _____

Co-Applicant

First: _____ M Last: _____
DOB: _____ SS# _____
D/L#: _____ State: _____
Home Phone: () _____
Cellular #: () _____
Email: _____

Current Address Renting From:

Address: _____
City: _____ State: _____ Zip _____
How Long? _____ Rent: _____
Lease: Yes / No Expiration: _____
Reason for Moving: _____
Owner/Landlord: _____
Phone: () _____

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:

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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: _____

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

Pets names: _____ What kind: _____

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

Any existing Judgments: Yes / No Details: _____

Ever filed Bankruptcy? Yes / No Details: _____

Ever been Foreclosed? Yes / No Details: _____

Automobiles:

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

Make of car: _____ Year: _____ Color: _____ Insured by: _____

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

Make of car: _____ 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 is 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 ground 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: _____