

JAMAR PROPERTY MANAGEMENT CO.
P. O. BOX 7812
BLOOMINGTON, INDIANA 47407
phone: 812-330-8655 fax: 812-330-8657

RENTAL APPLICATION
Equal Housing Opportunity

PERSONAL INFORMATION

Address of property you are interested in leasing: _____
Full Name _____ Previous Name(s): (maiden) _____
Date of Birth: _____ SSN # _____ Driver's License: State _____ # _____
E-mail address _____ Phone # _____ 2nd Phone _____

ADDRESSES

Current Address _____ How long? _____ Rent \$ _____
City: _____ State _____ Zip _____ Reason for moving _____
Current Landlord Name _____ Phone _____
Previous Address _____ How long? _____ Rent \$ _____
City: _____ State _____ Zip _____ Reason for moving _____
Previous Landlord Name _____ Phone _____
Next Previous Address _____ How long? _____ Rent \$ _____
City: _____ State _____ Zip _____ Reason for moving _____
Next Previous Landlord Name _____ Phone _____

CREDIT HISTORY

Have you declared bankruptcy in the past seven (7) years? Yes _____ No _____
Have you ever been evicted from a rental residence? Yes _____ No _____ If yes, please explain why:
Have you had two or more late rental payments in the past year? Yes _____ No _____
Have you ever intentionally refused to pay rent when due? Yes _____ No _____

AUTOMOBILES

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

Complete the next page in full and sign

EMPLOYMENT INFORMATION

Your Status: _____ Full Time _____ Part Time _____ Student _____ Unemployed

Current Employer _____ Phone No. _____

Address: _____ City: _____ State: _____ Zip: _____

How long? _____ Position _____ Income: _____

(If employed above less than 12 months, give name & phone number of previous employer or school:

Phone No. _____

If you have other sources of income that you would like us to consider, please list income source and person (banker, employer, etc.) whom we may contact for verification. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application.

Amount: \$ _____ Source/Contact Name _____

IF FULL TIME STUDENT, WILL PARENT SIGN A LETTER OF GUARANTEE FOR THE RENT? Yes ___ No ___

PARENTAL/EMERGENCY CONTACT INFORMATION

Name _____ Phone No. _____ 2nd Phone _____

Address _____ Relationship _____

City _____ State _____ Zip _____

E-Mail Address: _____

OTHER

Names and ages of all proposed occupants under 21 years of age: _____

Do you have pets? ___ Yes ___ No If yes, what kind? _____

Applicant for tenancy hereby warrants that all of the above statements are true, correct and complete and hereby authorizes verification of the information provided here including, but not limited to, obtaining a credit report and verification of employment, and agrees to furnish additional credit information upon request.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT ME UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY THEREOF.

Applicant's Signature _____ Date: _____

A completed and signed application is required for each adult applicant.

APPLICANT: PLEASE DO NOT WRITE BELOW (FOR OFFICE USE ONLY)

Deposit of \$ _____ Date received _____ Credit Report (circle one): (Favorable/Unfavorable)
Property applied for: _____

Other comments: _____

