



TIER 1

PROPERTY MANAGEMENT

Tenancy Application

Complete each line - Use n/a if necessary – Each applicant 18 years and older must fill out their own application.

Address Applying For

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Applicant Information

Full Name: _____ Move-in Date: _____
First *Last* *M.I.*

Phone: _____ Email: _____

Date of Birth: _____ Social Security No.: _____ Driver's License #: _____

Total # of Occupants: _____ # of Occupants Under 18: _____ # of Smokers: _____

Will Animals Occupy Residence? YES NO If yes, how many, breed, age, sex, name?: _____

Residential History

Present Address

Address: _____
 Do you? *Apartment/Unit #*
 Rent *Street Address*
 Own
 Family

City *State* *ZIP Code*

Move-In Date: _____ Move-Out Date: _____ Monthly Payment: _____

Reason for Moving: _____

Landlord Name and Address: _____ Landlord Phone: _____

Previous Address

Address: _____
 Do you? *Apartment/Unit #*
 Rent *Street Address*
 Own
 Family

City _____ State _____ ZIP Code _____

Move-In Date: _____ Move-Out Date: _____ Monthly Payment: _____

Reason for Moving: _____

Landlord Name and Address: _____ Landlord Phone: _____

Employment History

Present
Employer Name: _____ Position: _____
Address: _____ Phone: _____

Start Date: _____ Supervisor: _____ Annual Salary: \$ _____

Additional Income describe source: _____

Personal and Banking Information

Bank Name: _____ Branch/Location: _____

Checking Account #: _____ Phone: _____

Have you ever been evicted? YES NO

If yes, when & why: _____

Have you ever filed for bankruptcy? YES NO

If yes, when & why: _____

Have you ever been convicted of a felony? YES NO

If yes, when & why: _____

Vehicles to be Parked on Property

Vehicle 1

Vehicle Make: _____ Vehicle Model: _____ Vehicle Year: _____

Color: _____ License Plate Number: _____ State: _____

Vehicle 2

Vehicle Make: _____ Vehicle Model: _____ Vehicle Year: _____

Color: _____ License Plate Number: _____ State: _____

Emergency Contact Info

In case of an Emergency.

Name: _____ Relationship: _____ Phone: _____

Address: _____

Authorized to enter your property and remove all contents in the event of an emergency? YES NO

Disclaimer and Signature

I believe that the statements I have made are true and correct. I hereby authorize Tier 1 Property Management to verify through any means, including contacts listed on this application, credit and/or criminal check, consumer reporting agencies, and other property managers to be made. I understand that any discrepancy or lack of information may result in Tier 1 Property Management may reject this application. I understand that this is an application for a home or apartment and does not constitute a rental or lease agreement in whole or part. I further understand that there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund.

Tenant Signature: _____ Date: _____

Tenant Signature: _____ Date: _____