

# Rental Application

NAME OF TENANT:	DATE OF BIRTH:	SOCIAL SECURITY NO: _____-_____-_____	
NAME OF CO-TENANT:	DATE OF BIRTH:	SOCIAL SECURITY NO: _____-_____-_____	
PRESENT ADDRESS:	CITY:	STATE:	ZIP:
RESIDENCE PHONE:	BUSINESS PHONE:	CELL PHONE:	EMAIL:
HOW LONG AT PRESENT ADDRESS:	LANDLORD:	RENT AMT:	PHONE: WHY MOVING?
PREVIOUS ADDRESS: :	CITY:	STATE:	ZIP
OCCUPANTS RELATIONSHIP:	CHILDREN/AGES:	PETS/BREED:	
CAR MAKE:	YEAR:	MODEL:	COLOR: LICENSE NO:

## OCCUPATION

	PRESENT OCCUPATION*	PRIOR OCCUPATION	CO-TENANT'S OCCUPATION
OCCUPATION (FULL TIME OR PART)			
EMPLOYER			
SELF-EMPLOYED, D.B.A.			
BUSINESS ADDRESS			
BUSINESS PHONE			
TYPE OF BUSINESS			
POSITION HELD			
NAME AND TITLE OF SUPERVISOR			
HOW LONG EMPLOYED			
MONTHLY GROSS INCOME			

If employed or self employed less than 2 years, give same information on prior occupation.

## REFERENCES

BANK REFERENCE	ACCOUNT #	PHONE			
CREDIT REFERENCE	ACCOUNT NO.	ADDRESS	HIGHEST AMT OWED	PURPOSE OF CREDIT	DATE OPEN/CLOSED
PERSONAL REFERENCE	ADDRESS	PHONE	LENGTH OF ACQUAINTANCE	OCCUPATION	
NEAREST RELATIVE	ADDRESS	PHONE	CITY	RELATIONSHIP	

Do you smoke? \_\_\_\_\_

Have you ever filed for bankruptcy? \_\_\_\_\_

Have you ever been evicted from tenancy? \_\_\_\_\_

List any outstanding liens, judgments, & collections: \_\_\_\_\_

Have you ever been charged with a felony? \_\_\_\_\_

Have you ever willfully and intentionally refused to pay rent when due? \_\_\_\_\_

**I DECLARE THAT THE FORGOING INFORMATION IS TRUE AND CORRECT, AUTHORIZE ITS VERIFICATION AND THE OBTAINING OF A CONSUMER CREDIT REPORT. I AGREE THAT LANDLORD MAY TERMINATE ANY AGREEMENT ENTERED INTO IN RELIANCE OF ANY MISSTATEMENT MADE ABOVE. ALL SECURITY DEPOSITS TENDERED ARE NON REFUNDABLE.**

\_\_\_\_\_ APPLICANT

\_\_\_\_\_ APPLICANT

\_\_\_\_\_ DATE

\_\_\_\_\_ DATE

**Johnson Property Management, LLC**  
**www.jpmidaho.com**  
**PO Box 1023, Meridian, ID 83680**  
**(208) 884-3310 FAX (208) 884-1726**

Property Address: \_\_\_\_\_