

APPLICATION FOR OCCUPANCY

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Address of Rental Property Applying for: _____

APPLICANT PERSONAL INFORMATION

NAME: _____ **SAMPLE**

Single Married Separated Divorced (date of decree) _____

EMAIL ADDRESS _____ **SAMPLE** TELEPHONE _____ **SAMPLE**

SOCIAL SECURITY NUMBER _____ **SAMPLE** DATE OF BIRTH _____ **SAMPLE**

DRIVER'S LICENSE / GOVERNMENT ISSUED ID NUMBER _____ **SAMPLE** STATE _____ **SAMPLE** EXPIRATION DATE _____

DESIRED DATE OF OCCUPANCY _____ **SAMPLE** DESIRED LENGTH OF LEASE _____ **SAMPLE**

How did you hear about us?

Sign Our website Ad Referral: _____ **SAMPLE** Other: _____

EMPLOYMENT & BANK REFERENCES (Minimum one year verified employment required)

Current Employer: _____ **SAMPLE**

Address: _____ City: _____ State: _____ ZIP Code: _____

Telephone: _____ How long?: _____ Start date: _____

Department/Position: _____ Approximate Monthly Gross Income: \$ _____

If you have been with your current employer less than one year, please complete the following:

Previous Employer: _____ **SAMPLE**

Address: _____ City: _____ State: _____ ZIP Code: _____

Telephone: _____ How long?: _____ Date left: _____

Please provide a valid, enlarged copy of your current driver's license or government issued photo ID and your 2 most recent paystubs or proof of income.

Bank: _____ **SAMPLE** Branch: _____ **SAMPLE**

Telephone: _____

Account Number (checking): _____ **SAMPLE** Account Number (savings): _____ **SAMPLE**

Other Income: _____ (Indicate source & amount)

RESIDENCE HISTORY (Minimum one year required)

Current Rent/Mortgage Payment: \$ _____ How long?: _____ Own Rent

Current Address: _____ **SAMPLE**

City: _____ State: _____ ZIP Code: _____

Landlord: _____ Telephone: _____

If owned, please provide mortgage company name and address:

Mortgage Company: _____ **SAMPLE** Telephone: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

If you have been at your current address less than one year, please complete the following:

Previous Address: _____ **SAMPLE**

City: _____ State: _____ ZIP Code: _____

How Long?: _____

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Application for Occupancy >>

PERSONAL REFERENCES

1. Name: _____ Relation: _____
 Address: _____ **SAMPLE** Telephone: _____

2. Name: _____ Relation: _____
 Address: _____ **SAMPLE** Telephone: _____

3. Name: _____ Relation: _____
 Address: _____ **SAMPLE** Telephone: _____

DEPENDENTS/ADDITIONAL OCCUPANTS

Number of people who will occupy residence: _____

List occupants and their birthdates - CREDIT AND CRIMINAL BACKGROUND CHECKS WILL BE RUN ON EACH PERSON 18 & OVER.

Name: _____ Relationship: _____ D.O.B.: _____
 Name: _____ Relationship: _____ D.O.B.: _____
 Name: _____ Relationship: _____ D.O.B.: _____
 Name: _____ Relationship: _____ D.O.B.: _____

Additional occupants, see attached.

Person(s) to notify in case of emergency and that you authorize to enter and take possession of your personal property in the event of death, pursuant to A.R.S. §33-1314(F), disability or incarceration:

Name: _____ **SAMPLE**
 Address: _____ City: _____ State: _____ ZIP Code: _____
 Phone: _____ Email: _____

PETS/SERVICE ANIMALS

Will you have pets? Yes No (assistive and service animals are not considered "pets")

Description of pets (recent photo required):

Breed: _____ Age: _____ Gender: _____ Weight: _____
 Breed: _____ **SAMPLE** Age: _____ Gender: _____ Weight: _____

Will you have an assistive or service animal? Yes No (accomodation request required with application)

VEHICLE INFORMATION

Total Number of Vehicles (including company vehicles): _____

Vehicles:

Make: _____ Model: _____ Year: _____ Color: _____ Lic. Plate #: _____
 Make: _____ Model: _____ **SAMPLE** Year: _____ Color: _____ Lic. Plate #: _____
 Make: _____ Model: _____ Year: _____ Color: _____ Lic. Plate #: _____

Description of any other vehicles (boat, trailer, truck, recreational vehicle, etc.) you would like to keep on property:

Prior written permission separate from this application must be obtained from management.

CREDIT AND BACKGROUND HISTORY

(ANSWER ALL QUESTIONS FOR YOURSELF AND FOR ANYONE WHO WILL OCCUPY THIS RESIDENCE)

Have you ever been evicted? Yes No

Has a notice of eviction ever been filed against you? Yes No If so, when: _____

Have you ever declared bankruptcy? Yes No If so, when: _____ Discharge Date: _____

Have you had two or more late rental payments in the past year? Yes No

Have you ever willfully or intentionally refused to pay rent when due? Yes No

Do you currently owe any monies to an apartment community or landlord? Yes No

Do you use illegal drugs? Yes No

Have you ever engaged in the distribution or sale of illegal drugs? Yes No

Have you ever been convicted, arrested or charged with any crime? Yes No

Please give detailed explanation(s), date(s), and names for any question answered 'Yes' above: _____

Do you have any outstanding warrants or anticipate any warrants for arrest? Yes No >>

Application for Occupancy >>

ADDITIONAL INFORMATION

Have you or anyone in your household had, or do you presently have, bed bugs or other pest issues? [] Yes [] No

If yes, please explain:

SAMPLE

Please give any information that might help evaluate this application:

Blank lines for providing additional information.

SAMPLE

DEPOSIT TO HOLD AGREEMENT

In consideration of management holding this property for me, I agree to pay:

Earnest/holding deposit of a minimum of \$ _____ and
A non-refundable application fee of \$ _____ per person over 18 in CERTIFIED FUNDS ONLY*

*Additional fees will apply for non-U.S. residents and will vary according to current rates. IF YOU ARE A NON-US RESIDENT, PLEASE CALL FOR CORRECT APPLICATION FEE AMOUNT BEFORE APPLYING.

The earnest/holding deposit is refundable if my application is not approved (14-day delay required for bank clearance of check). If my Application is approved, the earnest/holding deposit is credited to the required move-in costs. IF APPLICANT SHOULD WITHDRAW THIS APPLICATION WITHIN 7 DAYS AFTER WRITTEN NOTIFICATION OF ACCEPTANCE, a minimum of \$ _____ of the earnest/holding deposit WILL BE RETAINED in addition to the non-refundable application fee. IF AFTER 7 DAYS OF NOTIFICATION OF ACCEPTANCE, APPLICANT WITHDRAWS OR FAILS TO EXECUTE LEASE AGREEMENT, ALL EARNEST/HOLDING DEPOSIT MONIES WILL BE FORFEITED. UNDER NO CONDITIONS WILL APPLICATION FEE BE REFUNDED.

Total deposits/fees submitted with application \$ _____

I hereby authorize and instruct Owner/Broker/Property Manager to investigate the information supplied by me and to conduct inquiries concerning my income, credit and character for the purpose of verifying and qualifying for this rental and any renewals thereof. I further authorize the release of any and all information available from any reference, former owners, and credit reporting services, department of motor vehicles, and governmental agencies. I hereby release and hold harmless all parties from liability for any damages that may result from furnishing this information to its owners, its agents and others. NOTE: Copy of actual credit report will not be provided to applicant by Owner/Broker/Property Manager.

Applicant acknowledges that Owner/Broker/Property Manager may not be able to complete a comprehensive evaluation of this information prior to move-in. Owner/Broker/Property Manager reserves the right to verify application information after move-in and may convert the proposed Lease Agreement to a month-to-month term or declare the lease irreparably breached and seek immediate eviction if false or misleading information is contained in this Application. Applicant agrees to the terms of this Deposit to Hold Agreement. This application is preliminary only and does not obligate owner or owner's representatives to execute a lease or deliver possession of the proposed Property. Owner/Broker/Property Manager comply with federal, state and local fair housing laws and regulations.

Unless otherwise agreed, I understand that the Brokerage, its Broker, its Agents, and employees are agents of and represent the Owner in leasing this property.

(Applicant's Initials Required) SAMPLE
APPLICANT

By signing below, I acknowledge and accept the qualifying criteria and policies of the Owner/Broker/Property Manager by which my application will be approved.

This application must be signed by applicant.

^ APPLICANT SIGNATURE _____ MO/DA/YR _____

FALSIFYING INFORMATION ON THIS APPLICATION IS GROUNDS FOR REJECTION.

FOR OFFICE USE ONLY

Agent Name: _____
Co-Broke? [] Yes [] No Exclusive? [] Yes [] No

Referred by: _____ At: _____

[] ACCEPTED Date of Written Notification: _____
[] REJECTED Date Denial Letter Was Sent: _____

Non-resident application fee? _____