

CLC Rental Application

CLCrental.com

Subject Rental Address & Unit					Date	
Full Name			Social Security Number		Date of Birth	
Current Address				Driver's License (or State ID)		
Years at Current Address	Current Rent		Home Phone	Work Phone	Email	
Current Landlord/Manager		Cur. Landlord/Manager Phone		Reason for Moving		
Previous Address				Period at Address (Start-End dates)		
Previous Landlord/Manager		Prev. Landlord/Manager Phone		Reason for Moving		
Name of every person to live with you in unit (even if only temporarily) and their relationship to you						
Pets: number & type		Waterbed <input type="checkbox"/> Yes <input type="checkbox"/> No	Automobile: make, model and license plate			
Primary Tenant Information			Co-Tenant Information			
Current Employer		Cur. Employer Phone		Current Employer		
Position	Job Start Date	Supervisor		Position	Job Start Date	
Previous Employer		Prev. Employer Phone		Previous Employer		
Position	Start & End	Supervisor		Position	Start & End	
Current Monthly Gross (Pre-Deduction) Income			Current Monthly Gross (Pre-Deduction) Income			
Monthly Alimony Income*	Other Monthly Income (w/ source)		Monthly Alimony Income*	Other Monthly Income (w/ source)		
[If "Yes" to any of the following, provide details and explanation.]			[If "Yes" to any of the following, provide details & explanation.]			
Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever filed for bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you being evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you being evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you behind on your rent? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are you behind on your rent? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are any of your accounts in collection? <input type="checkbox"/> Yes <input type="checkbox"/> No			Are any of your accounts in collection? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Checking Acct Bank	Bank Branch	Checking Acct #		Savings Acct Bank	Bank Branch	
Reference Name		Reference Phone		In case of emergency, contact:		
SIGNATURE & AUTHORIZATION: I declare that the statements above are true and correct. I authorize verification of my references and credit as they relate to my tenancy and to future rent collections.**					Date	