

RENTAL APPLICATION

Thank you for your interest in our apartment homes. Please complete all information.

Northcrest Garden Apartments
Coventry Court West Apartments

5439 North Clinton Street

Fort Wayne, IN 46825

Phone: (260) 484-1332

Fax: (260) 471-0442

Email: www.northcrestgardenapartments.com

TYPE and SIZE of APARTMENT WANTED:

DESIRED DATE OF OCCUPANCY:

FOR INTERNAL
USE ONLY

S: _____
M: _____
A: _____
R: _____
T: _____

THIS APPLICATION AND THE CONTENTS THEREOF ARE CONSIDERED AS PART OF MY LEASE

PERSONAL INFORMATION

APPLICANT'S NAME	SOCIAL SECURITY #	DATE OF BIRTH	DRIVER'S LICENSE #
STREET ADDRESS	CITY/STATE	ZIP	TELEPHONE #

CHILDREN'S NAMES AND/OR OTHER PERSONS LIVING WITH YOU

NAME	DATE OF BIRTH	RELATIONSHIP

ARE YOU CURRENT ON YOUR PRESENT RENT?

IF NOT, WHY?

HAVE YOU EVER BROKEN A LEASE?

IF SO, WHY?

HAVE YOU EVER BEEN CONVICTED OF A FELONY?

YES NO IF SO, WHAT?

DO YOU OWN A PET?

TYPE?

WEIGHT OF PET

COLOR OF PET

YES NO

RESIDENCE HISTORY

RESIDENCES: (Supply two years; if necessary use separate piece of paper)

APPLICANT'S LANDLORD OR MORTGAGE CO.:

TELEPHONE #

NAME:

AMT. OF MO. RENT \$

STREET ADDRESS:

FROM: TO:

CITY/STATE:

DID YOU PAY YOUR UTILITIES?

EMPLOYMENT HISTORY

APPLICANT'S PRESENT EMPLOYER:

TELEPHONE #

NAME:

CONTACT:

STREET ADDRESS:

EMPLOYMENT DATE:

CITY/STATE:

ANNUAL EARNINGS:

VEHICLE INFORMATION (LIMIT 3 VEHICLES PER UNIT)

YEAR	MAKE	MODEL	LICENSE PLATE	COLOR

EMERGENCY CONTACTS

NAME	ADDRESS	TELEPHONE	RELATIONSHIP

I/We hereby authorize and grant COVENTRY COURT WEST APARTMENTS, NORTHCREST GARDEN APARTMENTS or its designated assigns the unconditional and irrevocable right to obtain consumer credit reports, obtain Social Security Traces and Traceplus reports, contact any references, verify employment history, verify rental history and conduct a criminal background check. The above authorization and consent for obtaining consumer credit reports, Social Security Traces, Traceplus reports, and/or employment information is also granted for the express purpose of obtaining information to be used in collecting any debts or obligations that may still be owing under the lease agreement after the leased premises have been vacated. I also understand that once my application is approved, all money paid will be non-refundable and become liquidated damages as part of the application process if this application is cancelled for any reason. This application will become part of my lease agreement upon such time as a lease agreement is executed.

Applicant's Signature: _____

Date: _____