



1600 ATHENS DR.
LOVELAND, OH 45140

COMMUNITY: _____
UNIT #: _____
513-752-2888 RENTAL APPLICATION

NAME: _____ DATE OF BIRTH: _____ SSN: _____

NAME: _____ DATE OF BIRTH: _____ SSN: _____

PETS: YES _____ NO _____

PRESENT ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____ HOW LONG? _____

NAME OF LANDLORD/MORTGAGE COMPANY: _____

ADDRESS: _____ PHONE: _____

PRESENT EMPLOYER: _____ HOW LONG? _____

JOB TITLE: _____ MONTHLY SALARY: _____ PHONE: _____

PRESENT EMPLOYER: _____ HOW LONG? _____

JOB TITLE: _____ MONTHLY SALARY: _____ PHONE: _____

OTHER OCCUPANTS OF UNIT (including children):

Name: _____ Relationship: _____ Age: _____

AUTO: Make, Year and Color: _____ License No.: _____

EMERGENCY CONTACT: (List Relative or Friend, Not Spouse or Children)

Name: _____ Phone: _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? _____

HAVE YOU EVER BEEN EVICTED? _____

HAVE YOU EVER FILED FOR BANKRUPTCY? _____ IF YES, WHAT YEAR? _____

PET SECTION:

TYPE: _____ WEIGHT: _____ IF DOG, WHAT BREED? _____

IF ANY OCCUPANT IS 18 YEARS OR OLDER, THE OCCUPANT IS REQUIRED TO FILL OUT AN APPLICATION.
PLEASE NOTE TWO SPOTS FOR APPLICANTS ARE PROVIDED FOR CONVENIENCE.
AN ADDITIONAL APPLICATION MAY BE REQUESTED BY MANAGEMENT.