



APARTMENT RENTAL APPLICATION Custer, SD

New _____ Roommate added _____

Date Received: _____ Time Received: _____

Apartment #: _____ Who referred you? _____

NAME: Mr./Mrs./Miss _____

Present Address: _____ City/ State/Zip _____

Telephone Number: _____ Date of Birth: _____ S.S.N: _____

LIST PERSONS WHO WILL OCCUPY THE APARTMENT

Name: _____ Relationship: _____ D.O.B.: _____ Sex: M /F S.S.N _____

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PRESENT LANDLORD/MORTGAGE COMPANY:

Name and Address: _____

How long there?: _____ Monthly Payment?: _____ Phone Number : _____

Why are you leaving?: _____

PRESENT EMPLOYER: _____ Address: _____

Position: _____ Nature of Business: _____ How long?: _____

Income: _____ Hr. / Mo. / Yr Phone Number: _____

PREVIOUS EMPLOYER: _____ Address: _____

(If you need additional space for answers, use the back of this page.)

ROOM MATE'S EMPLOYER: _____ Address: _____

Position: _____ Nature of Business: _____ How long?: _____ Income: _____
Hr. / Mo. / Yr. Phone Number: _____

Other Income: Source: _____ Amount : \$ _____

BANK ACCOUNTS: Name: _____	Checking	Savings	Amount : \$ _____
Name: _____	Checking	Savings	Amount : \$ _____

CREDIT REFERENCES

	Amount Owing	Monthly Payment
1. _____	\$ _____	\$ _____
2. _____	\$ _____	\$ _____

How many vehicles would you keep at this address? (Include company cars, boats, campers, etc.) **IF** permitted

1	_____	Year: _____	Tag # _____	State: _____
2	_____	Year: _____	Tag # _____	State: _____
3	_____	Year: _____	Tag # _____	State: _____

HAVE YOU OR YOUR ROOMMATE EVER BROKEN A LEASE/RENTAL AGREEMENT OR BEEN EVICTED FROM AN APARTMENT?

Yes/ No If yes, please explain: _____

HAVE YOUR OR YOUR ROOMMATE EVER BEEN SUED FOR NON-PAYMENT OF RENT OR DAMAGES TO PROPERTY? Yes () No ()

If yes, please explain: _____

Desired date of occupancy? _____ Lease / month-to month term preferred? _____

Do you have any pets? Yes () No () If so, what kind? _____ Weight: _____

Does your pet have a current rabies vaccination? _____ When? _____

In case of emergency, please contact: _____ How related?: _____

Address: _____ Phone No.: _____

(If you need additional space for answers, use the back of this page.)

The above information is correct to the best of my knowledge. It is understood that the above information will be held strictly confidential. I authorize management to verify the information provided in this application by making the following inquiries:

- 1) Verification of wages and/or salary,
- 2) Verification of current and previous places of residence, including payment history,
- 3) A current credit inquiry through the Credit Bureau and/or other references listed on application. I understand that if the information received from the above listed inquiries do not fall within the guidelines of the admission standards, as established by management that my application may be denied.
- 4) Criminal background check.

Applicant has deposited herewith the sum of \$_____, the receipt of which is hereby acknowledged. This application is made with the understanding that it is subject to acceptance by the Lessor. The applicant agrees that he/she shall not have any right to occupy any of the premises of the Lessor until execution by the Applicant and by the Lessor of a written lease/rental agreement of a particular apartment to be leased/rented. The applicant agrees that the aforementioned deposit is not a rental payment and will not be applied towards any rental payment.

Applicant(s) agree and understand that each tenant is equally and separately legally responsible for the monthly lease/rental amount, and will be held accountable for such rental amounts and/or restitution for any damages.

The applicant further agrees that in the event the application is approved (the approval and the time thereof being in the sole discretion of the Lessor) and the applicant fails or refuses to enter into the contemplated lease within 24 hours of the approval of the application, applicant will forfeit deposit as liquidated damages. Applicant will take possession of the apartment by the desired date of occupancy or will forfeit all deposits paid to hold the apartment.

In the event that the application is not approved or the lease is not executed for any reason for which the Lessor is responsible, said deposit will be refunded to the Applicant.

Signature of Applicant(s):

_____	_____
Please Print	Please Print
_____	_____
Signature	Signature
_____	_____
Please Print	Please Print
_____	_____
Signature	Signature

Signature of Manager: _____ Date: _____
Stone Canyon SD, LLC