

RENTAL APPLICATION

Leasing Office:
384 Towne Court East
Columbus, Ohio 43230
614-471-7454 Fax 614-471-1560

Date of Application _____
Given By _____

O
F
F
I
C
E

U
S
E

Assigned Address _____ Move in Date _____
Lease Term: One Year / 13 Month / Other _____ Date _____ To _____
Rent \$ _____ Security Deposit \$ _____ Additional Fees and Deposits \$ _____
Number of Bedrooms _____ # of Persons _____ Furnished: No
Paid by Resident: Gas Electric Water Monthly Pet Fee (\$ _____)
Check One: Applicant Co-Applicant Spouse Lease Guarantor

T
O

B
E

C
O
M
P
L
E
T
E
D

B
Y

A
P
P
L
I
C
A
N
T

Name _____ Driver Lic. # _____
Drivers Lic. Address _____ City, State, Zip _____
Social Security # _____ Date of Birth _____
Present Address _____ Phone () _____
City, State, Zip _____ Cell/Pager () _____

Rent () Own () From _____ To _____ Rent \$ _____ **Marital Status**
Present Owner _____ Married _____
Phone () _____ Single _____
Widow _____
Owners Address _____ Separated _____
City, State, Zip _____ Divorced _____

Reason for Leaving _____ No. of Children _____

Previous Address _____ **Names/Ages of Children**
City, State, Zip _____ 1. _____
2. _____
3. _____
Rent () Own () From _____ To _____ Rent \$ _____
Previous Owner _____
Phone () _____ Pets _____

Owners Address _____
City, State, Zip _____
Reason for Leaving _____

If Current Student:
College _____ Student Year (Circle One) 1 2 3 4 Graduate School
College Funding \$ _____ Source _____

Present Employer _____ Phone _____
City, State, Zip _____
Employed From _____ To _____ Position _____ Full-time () Part-time ()
Monthly Income (gross) \$ _____ Supervisor _____

Previous Employer _____ Phone _____
City, State, Zip _____
Employed From _____ To _____ Position _____ Full-time () Part-time ()
Monthly Income (gross) \$ _____ Supervisor _____

Vehicles
Year _____ Make _____ Model _____ License # _____ MO/Pmts \$ _____
Year _____ Make _____ Model _____ License # _____ MO/Pmts \$ _____

Credit Cards
Name _____ Name _____
Name _____ Name _____

OVER

T
O
B
E
C
O
M
P
L
E
T
E
D
B
Y
A
P
P
L
I
C
A
N
T

ment, Credit Card and Revolving Accounts

Current Total Balances Owed \$ _____

Current Total Monthly Payments \$ _____

Bank References

Bank _____

Bank _____

If YES, please explain on a separate sheet.

- Y N Are you presently being evicted from a residential dwelling or have you ever been evicted?
- Y N Have you or your co-applicant ever been threatened with an eviction from any leased premises?
- Y N Have you ever filed Bankruptcy? When? _____
- Y N Have you ever been convicted of any drug-related or alcohol-related activity?
- Y N Have you ever engaged in the sale of illegal drugs?
- Y N Do you currently engage in the use or sale of illegal drugs?
- Y N Have you ever been convicted of a crime other than a minor traffic offense?
- Y N Are there any money judgments against you?
- Y N Do you owe anyone money for a residential dwelling for rent or damages either disputed or not disputed?

How did you find out about us? _____

If a resident referral, please give name _____

Emergency Contact Information

Name _____ Relationship _____
 Address _____
 City, State, Zip _____ Phone _____

Name _____ Relationship _____
 Address _____
 City, State, Zip _____ Phone _____

Read Carefully Before Signing

The management relies on the information given above to be complete and accurate in order to act on your application in a timely manner. Any false statements, misrepresentations, inaccurate information or failure to supply the data requested above may serve as a rejection of your application. By signing the application, you are authorizing the use of any credit reporting/screening agencies to verify credit, and validate accuracy of all information recorded above. Further, your signature authorizes the management and the credit reporting/screening agencies to later exchange credit information and access your credit report in the event of default of the lease agreement for collection or skip tracing purposes.

I hereby deposit with Olde Towne Apartments, LLC the sum of \$ _____ Money Order Check , as partial full security deposit on the above premises which will be held and applied as follows: (a) The deposit will be refunded to the Applicant(s) if this application is not approved; (b) If this application is approved and the Applicant(s) signs the Rental Agreement, the deposit will be applied as part of the security deposit required by the Rental Agreement; or (c) If this application is approved and the Applicant(s) refuses to sign the Rental Agreement, the agent will retain \$100.00 as a processing fee and will have the right to retain all or part of the balance of the deposit as liquidated damages for the refusal by the Applicant(s) to sign the Rental Agreement.

A non-refundable application processing fee of **\$35.00** has been given to Olde Towne Apartments, LLC.

Applicant Signature _____ Date _____

Co-Applicant Signature _____ Date _____

Lease Guarantor Signature _____ Date _____

Application Received By _____ Date _____

Breakdown: \$ _____ Security Deposit \$ _____ Other Fees Type _____
 \$ _____ Application Fee \$ _____ Total Fee Received

_____ Approved: Date _____ Conditions _____
 _____ Disapproved: Date _____

Applicant Notified: Date _____ By _____

Install

O
F
F
I
C
E
U
S
E