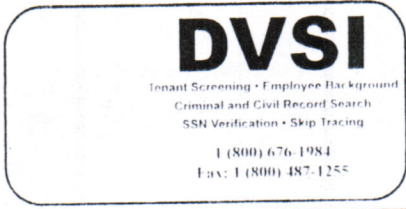


Rental Application



APARTMENT OR ACCOUNT NAME _____ MOVE-IN DATE _____ RENT AMT. \$ _____
 APARTMENT ADDRESS _____ UNIT # _____ MANAGEMENT COMPANY _____

APPLICANT - LAST	FIRST	INIT.	DRIVERS LICENSE #	SOCIAL SECURITY #	DATE OF BIRTH
SPOUSE <input type="checkbox"/> or CO-TENANT <input type="checkbox"/> (If Co-Tenant separate application must be completed)					SOCIAL SECURITY #
Identification Verified? Yes <input type="checkbox"/> No <input type="checkbox"/>					Waterbed? Yes <input type="checkbox"/> No <input type="checkbox"/>

LIST ALL OTHER PROPOSED OCCUPANTS	NAME:	AGE:	RELATIONSHIP

RESIDENCE HISTORY IT IS THE APPLICANT'S RESPONSIBILITY TO ENSURE ALL INFORMATION IS CORRECT AND COMPLETE. MISSING OR INCOMPLETE INFORMATION IS GROUNDS FOR REJECTION.

CURRENT ADDRESS	PREVIOUS ADDRESS	FORMER ADDRESS
Street Number _____ Name and Apt # _____	Street Number _____ Name and Apt # _____	Street Number _____ Name and Apt # _____
City _____ State _____ Zip _____	City _____ State _____ Zip _____	City _____ State _____ Zip _____
Hm# _____	Hm# _____	Hm# _____
Rent \$ _____ Deposit \$ _____	Rent \$ _____ Deposit \$ _____	Rent \$ _____ Deposit \$ _____
Moved In _____ Moved Out _____	Moved In _____ Moved Out _____	Moved In _____ Moved Out _____
Landlord Name _____	Landlord Name _____	Landlord Name _____
Landlord Ph # _____	Landlord Ph # _____	Landlord Ph # _____
Reason for leaving _____	Reason for leaving _____	Reason for leaving _____

EMPLOYMENT INFORMATION ON EMPLOYMENT HISTORIES MUST BE COMPLETE AND ACCURATE IN ORDER TO VERIFY INCOME. PLEASE LIST PHONE NUMBER OF PERSON TO VERIFY EMPLOYMENT.

PRESENT EMPLOYER	PREVIOUS EMPLOYER	SPOUSE'S EMPLOYER
NAME OF COMPANY OR EMPLOYER _____	NAME OF COMPANY OR EMPLOYER _____	NAME OF COMPANY OR EMPLOYER _____
Phone: _____	Phone: _____	Phone: _____
Position: _____	Position: _____	Position: _____
Monthly earnings \$: _____	Monthly earnings \$: _____	Monthly earnings \$: _____
Start Date: _____	Start Date: _____ End: _____	Start Date: _____ End: _____

PERSONAL INFORMATION

Have you ever used another social security number? Yes No

Have you ever filed bankruptcy? Yes No

Have you ever been convicted of a crime? In what state? Yes No

Are you a full time student? Yes No

Do you require special accommodations? Yes No

Have you ever been evicted from an apartment? Yes No

EMERGENCY CONTACT

Name of Nearest Relative/Contact	Relationship	Address, City, State, Zip.	Phone

I understand that I acquire no rights in an apartment until I sign an agreement in the form submitted to me and remit a holding fee of \$ _____ on the apartment I have selected. This holding fee will be held in accordance with the rental agreement. In return for the landlord's holding the apartment for me, I hereby waive all rights to the return of this holding fee. The holding fee will be held as liquidated damages in the event that I do not choose to enter into the agreement applied for herein. In the event that this agreement is not accepted, the holding fee will be returned to the applicant.

NON-REFUNDABLE PROCESS FEE \$ _____
 In compliance with the FAIR CREDIT REPORTING ACT, this is to inform you that a credit investigation involving the statements made on this application for tenancy at this apartment complex is being initiated. I/we certify that to the best of my/our knowledge all statements are true and complete. I/we further authorize DVSI to obtain credit reports, character reports, criminal reports and rental history as needed to verify all information put forth in this application. I also waive any legal rights toward DVSI in their reports or information.

Signed _____ Applicant Signed _____ Spouse or Co-Applicant Date _____
 Landlord _____ Title _____ Date _____