	<u> </u>	RESIDENT	MRESTA						
ADDRESS OF PROPERTY A	PPLYING FOR	₹:		DESIRED MOVE-IN DATE	: 				
APPLICANT INFO	RMATIO	Ni in the contract of the cont							
FIRST NAME:	A C CO	DDLE NAME:	Talkina titi	LAST NAME:	N	MAIDEN NAME:			
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PHOTO ID #:	ST.	STATE OF ISSUE:		EMAIL ADDRESS:					
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RESIDENCE HIS	TORY		P. 54						
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ADDRESS:	C	CITY:		STATE:		ZIP CODE:			
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OTHER OCCUP	ANT(S)	LIST NAMES OF ALL PERS	ONS UNDER 18 WH	O WILL OCCUPY THE UNIT. ALL	APPLICANTS 18 O	PR OVER MUST BE LISTED AS A	N APPLICANT)		
FIRST NAME:		LAST NAME:		RELATIONSHIP:		AGE:			
FIRST NAME:		LAST NAME:		RELATIONSHIP:		AGE:			
FIRST NAME:	L,	LAST NAME:		RELATIONSHIP:		AGE;			
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EMERCENCY	CONTA	CT(S)	<u> </u>			· =				<u>. </u>	- ··		
EMERGENCY CONTACT(S) FULL NAME: RELATIONSHIP:			D:	<u></u>	CONTACT PHONE:				EMAIL	EMAIL ADDRESS:			
FULL NAME: RELATIONSHIF			D: CONT			ONTACT PHONE: EM				IAIL ADDRESS:			
VEHICLE IN	ORMAT	ION	The second supplies the second	marrie .	<u> </u>				-		And to the second of		
· · · · · · · · · · · · · · · · · · ·	HICLE INFORMATION MAKE:		MODEL:		COLOR:				TAG#:			STATE	
YEAR M	AR MAKE:		MODEL:		COLOR:				TAG #:			STATE	
DESCRIBE ANY OTHER	VEHICLE, MOT	ORCYCLE, TRAILE	R OR BOAT YOU IN	ITEND TO	STORE	OR PARI	AT THE	PROF	PERTY:				
MANDATOR	YSCREE	NING QU	ESTIONS				1,+-1 4					natural de l'alla de l'annue de l	
Have you ever been	lave you ever been evicted or a defendant in an evicti				YES		NO	\Box		IF YES,	PLEASE E	XPLAIN:	
Have you ever filed, or are you in the process of filing, bar				/?	YES		NO						
Do you owe any other landlords a balance?					YES		NO						
Have you ever been asked to move for a lease violation of an				nd?	YES		NO						
Have you ever been	convicted of	a felony?			YES		NO						
Have you ever been	convicted of	a major misder	neanor?		YES		NO					• · <u> </u>	
OTHER INC	OME TO	CONSIDE	R		# ** ***	en en en		. بي د . . د.					
CHILD SUPPORT	\$	NAME & ADDRESS OF P.			AYER:								
ALIMONY:	\$		NAME & ADDRESS OF PAYER:										
SOCIAL SECURITY:	\$	DESCRIPTION OF BENEF				ITS:							
DISABILITY BENEFIT	S: \$ NAME OR SOL			IRCE OF PAYMENTS:									
PUBLIC ASSISTANCE	:: \$		NAME OF ASSISTANCE PROGRAM:										
OTHER:	\$	ma	DESCRIBE:	-									
Each person eighted application, in order application successful.	en (18) years	of age or olde	r must be listed :	as an al	pplicant in-refuni	on an a	applicat process	ing fe				ollected with the	
Tenancy will be der signed, we have the a third party service history, your credit without regard to ra	nied if any ir right to tern e to verify a history and	ninate your ren ny or all of the score(s), and re	tal agreement im following; your view criminal re	nmediat r curren cords w	ely, which t and/or within the	h woul past e last 2	d resul	t in yo ment,	ou being: , your cu	asked to lear rrent and/	ave the profession of the prof	roperty. We utili ental and evicti	
This is to advise that the above-reference criminal records se a complete rental h	ed rental pr arch, nation	operty, to obta wide eviction h	ain a consumer of istory search, to	credit r	eport fro the deta	om any ils of m	or all y emp	of th	e three o	credit bure ding salary	eaus, con informat	duct a nationw ion, and to obt	
SIGNATURE OF APPLICANT:			PRINTED	PRINTED NAME OF APPLICANT:						DATE:			
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