

Rental Credit Application for Crownpoint Apartments

Please fill in all blanks that apply to you. The more information we have, the easier and faster it is to process the application. Please enter dates as mm/dd/yyyy and use two digit state abbreviation.

Select desired community, desired apartment size and desired date of occupancy.

Select Community

Apartment Size

Desired Date

Name:

Social Security #

Driver's License #

Date of Birth:

Day:

Year

Marital Status

List other occupants and their relationship to above. (spouse, mother, father, son, daughter, etc.)

Name:

Relationship

D. O. B.

Social Security #

Name:

Relationship

D. O. B.

Social Security #

Name:

Relationship

D. O. B.

Social Security #

Do you have a pet? If yes, please list breed, height, weight and number

☐ Yes

☐ No

Give Pet Information

Have you ever broken a lease or been evicted from an apartment?

☐ Yes

☐ No

Please Give Circumstances

Have you ever been convicted of a drug related crime?

☐ Yes

☐ No

Please Give Circumstances

Have you been convicted of a felony in the last five (5) years?

☐ Yes

☐ No

Please Give Circumstances

List Address as:

Street Number

Apartment Number (if applicable)

City, State, and Zip

Address should cover at least the previous five years

Give Current Address

Reason For Leaving

Amount of Monthly Rent

Month and Year moved in

Owner / Agent

Agent's Phone Number

List Previous Address

Reason For Leaving

Amount of Monthly Rent

Month and Year moved in

Owner / Agent

Agent's Phone Number

List Previous Address	<input type="text"/>	Reason For Leaving	<input type="text"/>	Amount of Monthly Rent	<input type="text"/>		
Month and Year moved in	<input type="text"/>	Owner / Agent	<input type="text"/>	Amount of Monthly Rent	<input type="text"/>		
Current Employer	<input type="text"/>	Employer's Address	<input type="text"/>	Employer's Phone	<input type="text"/>		
Date(s) Hired	<input type="text"/>	Dept./Position	<input type="text"/>	Weekly Wages	<input type="text"/>		
Number Hours	<input type="text"/>	Supervisor's Name	<input type="text"/>	Supervisor's Number	<input type="text"/>		
Previous Employer	<input type="text"/>	Employer's Address	<input type="text"/>	Employer's Phone	<input type="text"/>		
Date(s) Hired	<input type="text"/>	Dept./Position	<input type="text"/>	Weekly Wages	<input type="text"/>		
Number Hours	<input type="text"/>	Supervisor's Name	<input type="text"/>	Supervisor's Number	<input type="text"/>		
Bank Name	<input type="text"/>	City/State	<input type="text"/>	Account #	<input type="text"/>	Type	<input type="text"/>
Bank Name	<input type="text"/>	City/State	<input type="text"/>	Account #	<input type="text"/>	Type	<input type="text"/>
Bank Name	<input type="text"/>	City/State	<input type="text"/>	Account #	<input type="text"/>	Type	<input type="text"/>

Please enter the vehicle information listed below of all vehicles belonging to person(s) on the lease agreement.

Make	<input type="text"/>	Model	<input type="text"/>	Color	<input type="text"/>	Year	<input type="text"/>	Tag #	<input type="text"/>	State	<input type="text"/>
Make	<input type="text"/>	Model	<input type="text"/>	Color	<input type="text"/>	Year	<input type="text"/>	Tag #	<input type="text"/>	State	<input type="text"/>
Make	<input type="text"/>	Model	<input type="text"/>	Color	<input type="text"/>	Year	<input type="text"/>	Tag #	<input type="text"/>	State	<input type="text"/>

In Case of Emergency List Contact Information Below.

Name and Address	<input type="text"/>	Relationship	<input type="text"/>	Area Code and Phone Number	<input type="text"/>
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If the management and/or its agents, have any questions about this application, please give PHONE NUMBERS where you can be reached.

Daytime Phone	<input type="text"/>	Evening Phone	<input type="text"/>	E-Mail Address	<input type="text"/>
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Name of Applicant

Name of Co-Applicant

Date

Make comments or add any additional information that may help to process this application.

I authorize Sugar Creek Apartments and / or its agent to examine my credit history. I certify that the above information is correct, and I understand that this application may be revoked if any information furnished is found to be incorrect. I hereby grant this property and / or its agent the right to process this application for the purpose of obtaining a Rental / Lease agreement with this property. Additionally, I authorize all current and former employers to release information they may have about me and release them from any liability and responsibility from doing so.

If I submit a deposit of \$150.00, I understand that it is refundable if this application is denied. If the reservation is canceled for any reason within three (3) calendar days from the date the deposit is given to a representative of Sugar Creek Apartments, I agree to forfeit \$50.00. If the reservation is canceled for any reason in four (4) or more calendar days, I agree to forfeit the full deposit paid.

If you agree to above conditions and have entered all the correct information then check the box below and submit the application.

☐ I have read and agree to the above conditions and terms as explained

WE DO BUSINESS IN ACCORDANCE WITH THE FEDERAL FAIR HOUSING LAW, IT IS ILLEGAL TO DISCRIMINATE AGAINST ANY PERSON BECAUSE OF RACE, COLOR, RELIGION, SEX, HANDICAP, FAMILIAL STATUS, OR NATIONAL ORIGIN.