

Benchmark Apartments Lease Application

Applicant's full name _____ Social Security No. _____ Date of birth _____

Present street address _____ City _____ State _____ Zip _____

Apartment name _____ Apt. No. _____ Present home phone _____

Name of above property owner or apartment manager _____ Phone _____

Previous street address _____ City _____ State _____ Zip _____

Apartment name _____ Apt. No. _____ Move out date _____

Name of above property owner or apartment manager _____ Phone _____

Present employer _____ Address _____ City \ State _____

Kind of work _____ How long _____ Work phone _____

Monthly income _____ Supervisor's name _____ Supervisor's phone _____

Previous employer (immediately before above) _____ Address _____ City \ State _____

Kind of work _____ How long _____ Work phone _____

Monthly income _____ Supervisor's name: _____ Supervisor's phone: _____

List Name of nearest Relative: _____ Address : _____ Phone Number: _____

List name and relationship of all persons to be occupying the premises:

Name _____ Name _____

Name _____ Name _____

If any occupant is a minor, responsible party is _____

List all vehicles to be parked on the premises by applicant or other occupant:

Type vehicle _____ Year _____ License no. _____ State _____

Type vehicle _____ Year _____ License no. _____ State _____

Will you or the other occupants have a pet? _____ Kind, weight, breed and age _____

Bank _____ Address _____ City _____ State _____

Active checking acct. no. _____ Active savings acct. no. _____

Visa \ Master Card _____ Acct. no. _____ Expiration date _____

Second credit reference _____ Acct. no. _____ Expiration date _____

Why are you leaving your present residence? _____

Have you ever been evicted? _____ Have you ever broken a rental agreement or lease? _____ Have you ever declared bankruptcy? _____

Have you ever been sued for nonpayment of rent or damages to rental property? _____ Have you ever been convicted of a felony? _____

The undersigned person represents that all the above statements are true and complete and hereby authorizes verification of such information. False information may result in non-acceptance of this application and or termination of lease.

APPLICANTS WITH DRUG RELATED MISDEAMEANORS OR FELONIES WILL NOT BE CONSIDERED FOR OCCUPANCY

Signature of Applicant: _____ Date: _____

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