

Crosswinds Village Rental Application

Each Individual 18 and over **MUST** Complete a Separate Application Form

Non-Refundable Application Fee: \$15.00 ~ Please Print Clearly

ALL FEES CHECK OR MONEY ORDER ONLY

Personal Information:

Last Name		First Name		Middle Initial	Social Security Number	
Date of Birth		Driver's License No.		State	Home Phone Number () -	
1. Present Home Address				City		State
				Zip Code		
Apartment Name / Mortgage Holder / Landlord		Phone Number () -		From: (year)	To: (year)	
Monthly Payment		State Reason for Leaving				
2. Previous Home Address				City		State
				Zip Code		
Apartment Name / Mortgage Holder / Landlord		Phone Number () -		From: (year)	To: (year)	
Monthly Payment		State Reason for Leaving				
3. Next Previous Home Address				City		State
				Zip Code		
Apartment Name / Mortgage Holder / Landlord		Phone Number () -		From: (year)	To: (year)	
Monthly Payment		State Reason for Leaving				

Status / Spouse Information:

Place an "X" in One Box	Single	Married	Widowed	Separated	Divorced	If Separated/Divorced: From Whom?	
Spouse's Last Name		Spouse's First Name		Spouse's M.I.		Spouse's Social Security #	
Date of Birth		Driver's License No.		State	Home Phone Number () -		

Proposed Occupants:

Last Name		First Name, M.I.		Age	Relationship	
Last Name		First Name, M.I.		Age	Relationship	
Last Name		First Name, M.I.		Age	Relationship	
Do you have a pet?		Type		Size		

Employment History:

Present Employer		Position / Title		Approximate Gross Monthly Income		
Business Address				City		State
				Zip Code		
Date Hired	Supervisor's Name		Supervisor's Title / Position		Phone Number () - Ext.	
Previous Employer			Position / Title		Approximate Gross Monthly Income	
Business Address				City		State
				Zip Code		
Date Hired	Date You Left		Supervisor's Name		Phone Number () - Ext.	

Spouse's Employer		Position / Title		Approximate Gross Monthly Income		
Business Address				City		State
				Zip Code		
Date Hired	Supervisor's Name		Supervisor's Title / Position		Phone Number () - Ext.	

Personal References:

Name		Phone Number () -		Relationship	
Name		Phone Number () -		Relationship	
Name		Phone Number () -		Relationship	

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Vehicle Information:

Year	Make	Model	Color	License Tag #
Registered To:				
Year	Make	Model	Color	License Tag #
Registered To:				

Other Information:

Have you ever been convicted of a crime other than a minor traffic offence?	
If yes, please explain	
Have you ever been evicted?	
Have you ever-declared bankruptcy?	If yes, please explain:
If this is a guarantor application, what is your relationship to the resident?	
How did you hear about us?	If resident referral, name must be provided at time of application

APPLICANT AUTHORIZATION

Applicant represents that all the above statements are true and correct and by signing the application, you are authorizing the use of any credit reporting/screening agencies to verify credit, validate the accuracy of all information recorded above including, but not limited to, the obtaining of a credit report. Applicant also agrees to furnish additional credit references upon request. Landlord/Agent received a payment of \$35.00, which will be used to verify applicant's credit history and other background information including, but not limited to, police report and rental history. 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. Falsification of the application will result in denial of residency.

Signature: _____ Date: _____

Signature: _____ Date: _____

OFFICE USE

Application Taken By		
Rented Address	Rental Amount	
Occupancy Date	Beginning Lease Date	Ending Lease Date

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