



4884 East Broadway Blvd, Tucson, Arizona 85711 Office 520-881-4884 Fax 520-881-2271

RENTAL ADDRESS:	Occupancy Date:
Submit with application Non-Refundable Application Fee \$	Holding Deposit \$ (MONEY ORDER ONLY)
Lease Term:	Rent Amt \$ Sec Dep \$ Other \$

RENTAL APPLICATION

In order to be considered the following must be filled out completely and signed. (Please Print)

1. Applicant Name _____ Email Address _____
 Social Security Number _____ Date of Birth _____
 Home Phone _____ Cell Phone _____ Work Phone _____
 Current Address _____ Years There _____
 City _____ State _____ Zip Code _____
 Contact (Landlord, Manager, or Apt Name) _____ Phone _____
 Previous Address _____ Years There _____
 City _____ State _____ Zip Code _____
 Contact (Landlord, Manager, or Apt Name) _____ Phone _____
 Current Employer _____ Years Employed _____
 Employers Phone _____ Supervisor _____ Wages Per Month _____
 Other Income (Verification will be requested) _____ Amt _____
 Bank Name _____ Phone # _____ Acct # _____

2. Co-Applicant _____ Email Address _____
 Social Security Number _____ Date of Birth _____
 Home Phone _____ Cell Phone _____ Work Phone _____
 Current Employer _____ Years Employed _____
 Employers Phone _____ Supervisor _____ Wages Per Month _____
 Other Income (Verification will be requested) _____ Amt _____

2 Forms of I.D. Required () Drivers License () Social Security Card () Other _____

List names and ages of other occupants.

Name _____ Age _____ Name _____ Age _____
 Name _____ Age _____ Name _____ Age _____

Additional weekend or regular guests _____

Pet Information Breed _____ Age _____ Weight _____
 Breed _____ Age _____ Weight _____

In Case Of Emergency Notify

Name: _____ Relation: _____ Phone: _____

