

Supervisor

Rental Application

912 N. Linden Street ♦ Bloomington, IL 61701 ♦ T: 309.827.8576 ♦ F: 309.827.8578

(NOTE: <u>Each adult person</u> that will reside in the rental property (occupants) must complete and sign <u>an application</u> form) NOTE: All requests for information as set forth in this Application must be provided and any omission or misrepresentation of any information is <u>automatic grounds</u> for rejection of this application)

(NOTE: Lessor does not deny or reject applications on the basis of race, color, religion, national origin, sex, ancestry, age, maritalstatus, physical or mental handicap, familial status or any other class protected by Article 3 of the Illinois Human Rights Act or federal law.)

Human Rights Act or lederal law.)				
PLEASE TELL US ABOUT YOURS	ELF			
Applicant #1 Full Name (First/Last)		Phone ()	
Date of Birth / Social Sec	curity No			
Driver's License No. /State				
Applicant #2 Full Name (First/Last)		Phone ()	
Date of Birth / Social Sec	curity No	Email		
Driver's License No. /State				
PLEASE GIVE YOUR RESIDENCE	HISTORY			
Applicant #1 Address	City	Stat	e	Zip
Month and Year Moved InOwner or Manager	Reason for Lea	ving		
Owner or Manager	Phone ()	Mont	thly Rent \$_	
Previous Address	City	Stat	e	Zip
Month and Year Moved In	Reason for Lea	ving		
Owner or Manager	Phone ()	on for LeavingMonthly Rent \$		
Applicant #2 Address		City	State	Zin
Applicant #2 Address Month and Year Moved In	Moved Out	City	Siaic	Zıp
Owner or Manager				
Previous Address				
Month and Year Moved In				
Owner or Manager	Phone ()	Mont	thly Rent \$_	
PLEASE GIVE US YOUR EMPLOY				
Applicant #1 status: Employed Full-Ti			□ Retired	□ Not Employed
EmployerAddress			ma ()	
Date(s) Employed/From	То	Position_	one ()	
Supervisor	10	Your Gross Month	nly Salary \$	
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Applicant #2 status: ☐ Employed Full-Ti	ime Employed Pa	art-Time	☐ Retired	☐ Not Employed
Employer				
Address		Pho	one ()	
Date(s) Employed/From	To	Position		

Your Gross Monthly Salary \$

TOTA	L NUMBER OF VEH	ICLES				
		·		License	No	
Make/I	Model	Year_	Color Color	License	No	
f "yes" ave yo	please explain date, pl u ever, besides eviction	ace, landlord, reason and on, had a civil lawsuit f	st you for eviction? Ched final outcome (attach a liled against you (Exam te, place, reason and final	dditional sheets if r	necessary): yed, etc.)?	
uvenile		e: □ yes □ no. If "yes", p	of a criminal offense (e please explain charge, da	0 1		
Do you	have pets? (Circle): Y	ES NO If "Yes", a	ll the following information	n for each animal mu	st be provided:	
Animal	Туре:	Breed:	Name	Color:	Age (Years):	Weight (Lbs.):
No. 1						
No. 2						
Full	Address:	MERGENCY, NOTIFY:_	Work Phone:			
Full N		DER THE AGE OF 18 YE	EARS	Date of Birth:	/	/
Full N				Date of Birth: Date of Birth: Date of Birth:	/	/
Full N	lame:			Date of Birth:	/	
	APPL	ICATION GIVEN F	OR THE FOLLOWI	NG APARTME	NT	
Addre	ss.		Apartment	#•		
			cupancy Dates:			
emple other	oyees, contractors, and	l agents, to obtain a copy consumer reporting agen	ant consents to and author of my credit report/hist cy and/or obtain any info	ory from the Credit	t Bureau or ot	
agree By si	ment is created herein	and that I am at most a	ant understand that it is no prospective tenant or occurrent and my move in feet	cupant.		
By si	gning this document,		aswered the above questing is grounds for eviction			

Signature of Applicant_______Date Signed___/___/

FOR OWNER'S USE ONLY

Action	Date	Staff Initials
Received Application		
Checked Application for completion of all information	on	
Checked Application for signatures		
Checked for other adult occupants' separate applicati	on(s)	
Collected Application Process Fee (One Fee Per App	olicant)	
Action	Date/Initials	Approval Y/N
Checked Credit Report		
Checked Court Records		
Checked Illinois Sex Offender List		
Checked Employment		
Checked Landlord References		
Application Approval (circle) Yes N	Io	
Reason for Denial		
Manager Initial		
Contacted Date:	By:	