

Rental Application  <small>EQUAL HOUSING OPPORTUNITY</small>	Keystone Apartments 1101 Burlew Blvd. Owensboro, KY 42303 Ph. (270) 685-2100 FAX (270) 926-7335	Professionally managed by:  Goebel <i>Commercial Realty, Inc.</i>
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Personal Information					
Title	First	Middle	Last	Suffix	Applying As (Circle One): Lessee Guarantor
					Address Applying For:
Current Address		City	State	Zip	Date apartment/home needed
Drivers License Number		State	Mother's Maiden Name		Social Security Number
Home Phone		Work Phone		Ext	Cell Phone
How Long at Current Address		E-Mail			Date of Birth
Landlord		Landlord Phone		Pets	Pet Weight

Current Employment & Salary					
Employed Y / N	If Not Employed, Please Describe		Company Name		Position
How Long	Address		City	St	Phone
					Gross Monthly Income

List All Other Co-Applicants and Occupants Below					
Name	Social Security Number		Date of Birth	Employer	Gross Monthly Income
Name	Social Security Number		Date of Birth	Employer	Gross Monthly Income
Name	Social Security Number		Date of Birth	Employer	Gross Monthly Income
Name	Social Security Number		Date of Birth	Employer	Gross Monthly Income

Previous Employment & Salary						
Company Name		Address		City	St	Position
How Long	Phone		FAX		Gross Monthly Income	
Other sources of income you would like us to consider?			Amount	Source	Net Worth	

Prior Residence Information										
Prior 1 Address			City	St	Zip	Moved In	Moved Out	Reason For Leaving	Landlord Name	Phone
Prior 2 Address			City	St	Zip	Moved In	Moved Out	Reason For Leaving	Landlord Name	Phone

Credit Information					
Creditor Name		City		St	Account Number
Creditor Name		City		St	Account Number
Ever Filed Bankruptcy? Y / N	Ever Evicted? Y / N	Refused to Pay Rent? Y / N	Has Anyone Listed Above Ever Been Convicted of a Felony? Y / N		If YES to any of these, please explain on reverse side.
Banking Institution Name			Account Number		

Personal References								
Name	Address		City	St	Zip	Phone	How Long?	Relationship
Name	Address		City	St	Zip	Phone	How Long?	Relationship

Emergency Contact							
Contact Name		Address		City	St	Zip	Relationship
Home Phone		Cell Phone		Work Phone		Ext	Other

Vehicle Information					
Primary Vehicle Make / Model		Year	Color	Tag Number	State
Primary Vehicle Make / Model		Year	Color	Tag Number	State

In compliance with the fair credit reporting act, this is to inform you that a credit investigation involving the statements made on your rental application for tenancy at the above mentioned apartment community/home is being initiated. I/We certify that to the best of my/our knowledge all statements are true and complete. I/We further authorize you to obtain credit reports, character reports, criminal background, employment information and verify rental history as necessary to verify all information put forth in the above referenced application for tenancy. I/We realize any false information will disqualify the rental application and will cancel any lease agreement at the sole discretion of the lessor. We further understand that application fees are non-refundable.

Signed		Signed	
Applicant		Applicant	
Dated		Dated	

For Office Use Only				
Check One: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Conditional By:	Notes:	Move-in Date		AMOUNT DUE FOR MOVE IN
		Monthly Rent		\$
		Pro-Rated Rent		\$
		Security Deposit		\$
		Pet Deposit		\$
		Pet Rent		\$
Manager		Date	TOTAL	\$