



GRANDRIVERS
APARTMENTS, CABINS & RV'S (970) 773-1072

For Office Use Only

Unit Number _____ Move in date _____ Monthly Rent \$ _____

Parking space# _____ Application fee received? _____



RENTAL APPLICATION

Every occupant over the age of 18 **MUST** fill out a separate application (even if married).
Please fill out this form **COMPLETELY** and sign where indicated.

PERSONAL INFORMATION

FIRST NAME		MIDDLE	LAST NAME		SS#
DATE OF BIRTH		PREFERRED MOVE IN DATE		DRIVERS LICENSE #	STATE
PHONE		ALT PHONE	EXT.	EMAIL	
PRESENT HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME			PRESENT LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING			AMOUNT OF RENT	Is your present rent up to date? YES NO	
PREVIOUS HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME			PREVIOUS LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING			AMOUNT OF RENT	Is your present rent up to date? YES NO	
NEXT PREVIOUS HOME ADDRESS			CITY/STATE/ZIP		
LENGTH OF TIME			NEXT PREVIOUS LANDLORD	LANDLORD PHONE	
REASON FOR LEAVING			AMOUNT OF RENT	Is your present rent up to date? YES NO	

PROPOSED OCCUPANT(S)

NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE
NAME	RELATIONSHIP	OCCUPATION	AGE

PROPOSED PET(S)

NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE
NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE
NAME	TYPE/BREED	INDOOR	OUTDOOR	AGE

VEHICLE(S) INFORMATION

YEAR	MAKE	MODEL	COLOR	PLATE#	STATE
YEAR	MAKE	MODEL	COLOR	PLATE#	STATE

EMPLOYMENT

CURRENT EMPLOYER		OCCUPATION	HOURS/WEEK
SUPERVISOR		PHONE	EXT: YEARS EMPLOYED
ADDRESS		CITY/STATE/ZIP	
CURRENT EMPLOYER		OCCUPATION	HOURS/WEEK
SUPERVISOR		PHONE	EXT: YEARS EMPLOYED
ADDRESS		CITY/STATE/ZIP	

INCOME						
CURRENT INCOME \$	BIWEEKLY:	MONTHLY:	YEARLY:	SOURCE	PROOF OF : YES INCOME	NO
CURRENT INCOME \$	BIWEEKLY:	MONTHLY:	YEARLY:	SOURCE	PROOF OF : YES INCOME	NO
CURRENT INCOME \$	BIWEEKLY:	MONTHLY:	YEARLY:	SOURCE	PROOF OF : YES INCOME	NO

CREDIT CARD / FINANCIAL INFORMATION			
CAR LOAN LIEN HOLDER	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CHILD SUPPORT OTHER CREDIT OWED	BALANCE OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
BANK ACCOUNT NAME OF BANK	BALANCE OWED	MONTHLY PAYMENT	ACCOUNT NUMBER

EMERGENCY / PERSONAL REFERENCE				
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE	HOME WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
EMERGENCY CONTACT	PHONE	CELL HOME	PHONE	HOME WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE	CELL HOME	PHONE	HOME WORK
RELATION	ADDRESS		CITY/STATE/ZIP	
PERSONAL REFERENCE	PHONE	CELL HOME	PHONE	HOME WORK
RELATION	ADDRESS		CITY/STATE/ZIP	

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors and any other sources deemed necessary to investigate applicant. All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

X _____
 APPLICANT SIGNATURE DATE

If you have any questions about the interpretation or legality of this form, please consult an attorney or other qualified person.

NOTES:



Applicant Authorization And Consent For Release of Information

BY SIGNATURE BELOW, I AUTHORIZE NATIONAL CREDIT REPORTING AND ITS DESIGNATED AGENTS AND REPRESENTATIVES TO PERFORM A COMPREHENSIVE REVIEW OF MY BACKGROUND THROUGH A CONSUMER REPORT AND/OR AN INVESTIGATIVE CONSUMER REPORT TO BE GENERATED FOR CONSIDERATION AS A TENANT AND RENTER. FOR THIS PURPOSE, I AUTHORIZE AND UNDERSTAND THAT THE SCOPE OF THE CONSUMER REPORT/INVESTIGATIVE CONSUMER REPORT MAY INCLUDE, BUT IS NOT LIMITED TO, THE FOLLOWING AREAS: NAMES AND DATES OF PREVIOUS/CURRENT EMPLOYMENT, WORK EXPERIENCE, EVICTION NOTICES, CRIMINAL HISTORY RECORDS (FROM LOCAL, STATE, FEDERAL, INTERNATIONAL AND OTHER LAW ENFORCEMENT AGENCIES' RECORDS), SEXUAL OFFENDER'S LISTS, WANTS AND WARRANT RECORDS, MOTOR VEHICLE RECORDS, CREDIT HISTORY, CIVIL CASES, OF AC/PATRIOTS ACT, ANY SANCTION LISTS, PERSONAL IDENTITY VERIFICATION AND SOCIAL SECURITY TRACE. I RELEASE ALL OF THE ABOVE, INCLUDING NATIONAL CREDIT REPORTING AND ITS AGENTS TO THE FULL EXTENT PERMITTED BY LAW FROM ANY CLAIMS, DAMAGES, LOSS, LIABILITES, AND EXPENSES ARISING FROM THE RETRIEVAL AND REPORTING OF INFORMATION. ALL REPORTS WILL BE KEPT CONFIDENTIAL.

ACCORDING TO THE FEDERAL FAIR CREDIT REPORT ACT, I AM ENTITLED TO KNOW IF I WAS DENIED BASED ON THE INFORMATION OBTAINED AND TO RECEIVE UPON WRITTEN REQUEST TO NATIONAL CREDIT REPORTING A DISCLOSURE OF THE PUBLIC RECORD INFORMATION AND OF THE NATURE AND SCOPE OF THE INVESTIGATIVE REPORT.

I CERTIFY THAT ALL INFORMATION PROVIDED BELOW AND ON MY RENTAL APPLICATION IS CORRECT TO THE BEST OF MY KNOWLEDGE. ANY FALSE STATEMENTS PROVIDED IN THIS FORM WILL BE CONSIDERED JUST CAUSE FOR THE TERMINATION OF TENANCY AT ANY TIME. THIS AUTHORIZATION AND CONSENT SHALL BE VALID IN ORIGINAL, FAX OR COPY FORM. THE FOLLOWING INFORMATION IS REQUIRED BY LAW ENFORCEMENT AGENCIES AND OTHER ENTITIES FOR IDENTIFICATION PURPOSES WHEN CHECKING RECORDS. IT IS CONFIDENTIAL AND WILL NOT BE USED FOR ANY OTHER PURPOSE.

Print First Name	Middle	Last
Previous Name (AKA/Alias)		Date of Birth
Social Security #		
Drivers License #		State Issued
Current Address		
City	State	Zip Code
Previous Address (Include Street, City, State and Zip)		Date of Residence

Signature _____ Date _____

California, Massachusetts Oklahoma, and New York Only: If you are a current resident and would like a copy of your Consumer Report or Investigative Consumer Report. please check the box. This report may include character and reputation information obtained through personal interviews.

For Property Manager's Use Only

Member ID#	Requestor
Property Name	Ref#