



# RENTAL APPLICATION

Fill out this application and Fax it to (520)459-0420, or scan it to plaza1@cox.net or mail to or visit our office at 2350 E. Wilcox D. #A, Sierra Vista, AZ. 85635.

**EACH ADULT, 18 YEARS OR OLDER, MUST COMPLETE AN APPLICATION PACKET:**

APPLICANT(S) ACKNOWLEDGES AND AGREES TO PAY A \$35.00 NON-REFUNDABLE APPLICATION FEE FOR ONE ADULT; OR FOR MARRIED COUPLE; OR \$30.00 EACH, FOR TWO OR MORE ADULTS.

APPLICANT(S) AGREES TO SIGN A LEASE WHEN OFFERED AND AS AN INDICATION OF GOOD FAITH HERewith PLACES AN EARNEST MONEY DEPOSIT IN THE AMOUNT OF \_\_\_\_\_; WHICH SHALL BE APPLIED TO THE MOVE IN COSTS. APPLICANT(S) FURTHER AGREES TO FORFEITURE OF SAID DEPOSIT IF HE/THEY REFUSE TO SIGN THE LEASE WHEN OFFERED. PARTIES AGREE THAT SAID FORFEITURE SHALL BE LIQUIDATED DAMAGES FOR THE BREACH OF THIS AGREEMENT. LESSOR AGREES TO RETURN SAID DEPOSIT MINUS APPLICATION FEES IF APPLICABLE.

FULL NAME: \_\_\_\_\_

LIST ALL NAMES THAT YOU HAVE EVER BEEN KNOWN BY: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

How LONG HAVE YOU RESIDED AT THIS ADDRESS? \_\_\_\_\_ REASON FOR MOVING? \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_  
NUMBER STREET CITY STATE ZIP CODE

How LONG HAVE YOU RESIDED AT THIS ADDRESS? \_\_\_\_\_ REASON FOR MOVING? \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_

DRIVERS LICENSE#: \_\_\_\_\_ STATE ISSUED: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**It is your responsibility to provide us with the information needed to contact your current and past Landlords. We reserve the right to deny any application if, after making a good faith effort, we are unable to verify rental history.**

**NAME, ADDRESS AND PHONE NUMBER OF CURRENT LANDLORD:**

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**NAME, ADDRESS AND PHONE NUMBER OF PREVIOUS LANDLORD:**

NAME: \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**OCCUPANTS OTHER THAN APPLICANT**

BIRTH DATE	NAME	SSN	RELATIONSHIP

I certify that the above information is true and correct to the best of my knowledge, and hereby authorize Plaza Apartments, its designated agents and employees to verify all information.

\_\_\_\_\_  
Signature Date



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**EMPLOYMENT AND OTHER INCOME:** All income, including self-employment, must be verifiable through pay stubs employer contact, or tax records.

**CURRENT EMPLOYER:** \_\_\_\_\_ **CONTACT:** \_\_\_\_\_

**ADDRESS & PHONE#:** \_\_\_\_\_

**MONTHLY INCOME:** \_\_\_\_\_ **LENGTH OF EMPLOYMENT:** \_\_\_\_\_

**PREVIOUS EMPLOYER:** \_\_\_\_\_ **CONTACT:** \_\_\_\_\_

**ADDRESS & PHONE#:** \_\_\_\_\_

**MONTHLY INCOME:** \_\_\_\_\_ **LENGTH OF EMPLOYMENT:** \_\_\_\_\_

**OTHER SOURCES OF INCOME:** \_\_\_\_\_ **AMOUNT:** \_\_\_\_\_

**VEHICLE INFORMATION FOR ALL VEHICLES THAT WILL BE PARKED ON PROPERTY:**

**MAKE:** \_\_\_\_\_ **MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_

**LICENSE PLATE #:** \_\_\_\_\_ **STATE ISSUED:** \_\_\_\_\_

**VEHICLE INFORMATION FOR ALL VEHICLES THAT WILL BE PARKED ON PROPERTY:**

**MAKE:** \_\_\_\_\_ **MODEL:** \_\_\_\_\_ **YEAR:** \_\_\_\_\_

**LICENSE PLATE #:** \_\_\_\_\_ **STATE ISSUED:** \_\_\_\_\_

**LIST THREE PEOPLE WHO WE MAY CONTACT IN CASE WE CANNOT REACH YOU OR IN THE EVENT OF AN EMERGENCY:**

**NAME:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**NAME:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

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### Have you or ANYONE (regardless of age) who will be residing with you EVER:

- Been arrested, cited, prosecuted, plead to or been convicted of a crime?  YES  NO
- Been placed on probation, parole, or affected by the Megan laws?  YES  NO
- Been in a gang, or currently a member of a gang?  YES  NO
- Been involved in, or are currently involved in any criminal activity?  YES  NO
- Been evicted or had a forcible detainer filed?  YES  NO
- Been a Petitioner in a case at bankruptcy court?  YES  NO
- Had a warrant, or currently have a warrant for arrest?  YES  NO
- Moved to avoid eviction or because of problems with a tenant or Landlord?  YES  NO

Please explain all "Yes" answers in detail:

### RESTRICTED DOG BREED INFORMATION

1) WE DO NOT ALLOW PIT BULLS, DOBERMAN PINSCHERS, AKITAS, ROTTWEILER'S, CHOWS, WOLF BREEDS OR ANY MIX THEREOF. OTHER BREEDS MAY BE RESTRICTED OR DENIED AT MANAGEMENT DISCRETION.

Initial \_\_\_\_\_

2) PIT BULL IS THE COMMON NAME FOR A TYPE OF DOG, IT IS NOT AN ACTUAL BREED. THERE ARE OVER 200 NAMES FOR PIT BULL TYPE DOGS. SOME FORMAL BREEDS OFTEN CONSIDERED OF THE PIT BULL TYPE INCLUDE BUT ARE NOT LIMITED TO:

- American Pit Bull Terrier
- American Staffordshire Terrier
- Staffordshire Bull Terrier
- American Bulldog
- Bull Terrier (standard and miniature)
- Blue Blood Bull Dogs
- Staffordshire Terrier
- St. Francis Terrier
- Any mix of these

Initial \_\_\_\_\_

3) NEW NAMES ARE INTRODUCED REGULARLY TO HELP ADOPT THESE DOGS OUT. WE DO NOT ALLOW ANY OF THESE DOGS ON OUR PROPERTIES. MANAGEMENT RESERVES THE RIGHT TO REQUEST A DNA TEST AND / OR REFUSE ANY DOG, REGARDLESS OF BREED AT ANY TIME BEFORE OR DURING TENANCY.

Initial \_\_\_\_\_

DO YOU HAVE A PET?  YES  NO IF YES, WHAT KIND / SIZE / INFO: \_\_\_\_\_

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\_\_\_\_\_  
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## Applicant ~Tenant Consent To Credit, Criminal, Employment, and Residential Verification

**The Undersigned applicant(s) and or co-signer(s) hereby consent to allow the owner, Plaza Apartments, itself or through its designated agents and employees, to obtain a consumer report and criminal records; obtain and verify credit and employment information; and authorizes Plaza Apartments to verify all residential information – for the purpose of leasing an apartment. I/we also agree and understand that the owner and its agents and/or employees may obtain additional information on each of us in the future to update or review our account.**

All applicants must sign and date below.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

I certify that the above information is true and correct to the best of my knowledge, and hereby authorize Plaza Apartments, its designated agents and employees to verify all information.

\_\_\_\_\_  
Signature Date