



Seaward Property Management

RENTAL APPLICATION

Property Applied For: _____

City _____ County _____

How many applicants _____

(Separate Application Required For Each Adult)

Application Fee Paid \$ _____

(Application Fees Are Non-Refundable)

APPLICANT	Phone #	Email:	
NAME	First Middle	Last	
SOCIAL SECURITY			
BIRTH DATE	Month Day	Year	
DRIVERS LICENSE			
VEHICLE	Year Make/Model	Color	
LICENSE PLATE			

TWO YEARS RENTAL HISTORY REQUIRED

CURRENT ADDRESS				
CITY/STATE/ZIP				
OCCUPANCY DATES	IN	OUT	IN	OUT
MONTHLY RENT				
OWNER				
OWNER PHONE #				
REASON FOR MOVING				

PREVIOUS ADDRESS

CITY/STATE/ZIP				
OCCUPANCY DATES	IN	OUT	IN	OUT
MONTHLY RENT				
OWNER				
OWNER PHONE #				
REASON FOR MOVING				

EMPLOYMENT (Last two years)

EMPLOYERS NAME		
ADDRESS		
PHONE NUMBER		
CONTACT PERSON		
YOUR POSITION		
HIRE DATE		
MONTHLY SALARY		
ADDITIONAL INCOME		

OTHER OCCUPANTS, AGE AND RELATIONSHIP:

DO YOU OWN ANY PETS YES NO TYPE(S): _____

HAVE YOU EVER BEEN CONVICTED IN THE SALE OR MANUFACTURING OF ILLEGAL DRUGS?

IF YES EXPLAIN: _____

DO YOU OWN WATERBEDS? CHECKING ACCOUNT NUMBER: BANK:

HAVE YOU EVER FILED BANKRUPTCY? IF YES, WHEN?

HAVE YOU EVER BEEN EVICTED? DESIRED MOVE IN DATE:

ARE YOU A MEMBER OF THE ARMED FORCES? IF YES, ARE YOU : ACTIVE RESERVE

HOW DID YOU LEARN ABOUT THIS PROPERTY? _____

I, (UNDERSIGNED) HEREBY GIVE PERMISSION TO HAVE ANY INFORMATION VERIFIED INCLUDING CREDIT, EMPLOYMENT, INCOME, BANK ACCOUNT, RENTAL HISTORY AND BACKGROUND CRIMINAL INFORMATION. I FURTHER AGREE THAT A PHOTOCOPY OF THIS AUTHORIZATION MAY BE ACCEPTED.

PROOF OF IDENTIFICATION IS REQUIRED: IDENTIFICATION USED _____

FIRST PAYMENT MUST BE MADE BY MONEY ORDER OR CASHIERS CHECK. CASH IS NEVER ACCEPTED. EL PRIMER PAGO TIENE QUE SER UN ORDEN DE PAGO CHEQUE DEL BANCO.

APPLICANT SIGNATURE	DATE
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