

# Application For Lease



Application is made to lease premises known as \_\_\_\_\_ for \_\_\_\_\_ months, beginning on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ for the monthly rent of \$\_\_\_\_\_ payable in advance on the first day of each month. Rent is to begin on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. It is understood the premises are to be used as a family residence occupied by not more than \_\_\_\_\_ persons; and that occupancy is contingent upon property being vacated by the present occupant. Occupancy of all residences shall conform with applicable zoning laws; and additionally, in the case of condominiums, with applicable by-laws, rules, and regulations. All personal property placed in said premises shall be at the Tenant's risk. I/We agree to apply for all utilities' services before taking occupancy of the leased premises and agree to pay for all applicable utilities' services before taking occupancy of the leased premises and agree to pay for all applicable utilities and all necessary deposits. A Deposit, which will be applied as the first month's rent in the sum of \_\_\_\_\_ is made herewith to be held by **Kale Realty** with clear understanding that this application, including each prospective occupant, is subject to approval and acceptance. If this application is not approved and accepted by the Landlord or Landlord's Agent, the deposit will be refunded within fifteen days from rejection date, the applicant hereby waiving addition, a separate Application Processing Fee of in the amount of \$50 will accompany this application. The credit check may take up to two working days to complete after it is received by the Listing Agent. A Security Deposit (which will include any applicable pet deposit) in the amount of \$\_\_\_\_\_ is due and payable to the Landlord or Landlord's Agent prior to occupancy. After approval and acceptance of the application by Landlord or Landlord's Agent, the applicant agrees to execute a lease in accordance with the terms of the application. The deposit shall be deposited by the Landlord or Landlord's Agent. If the applicant should fail to execute a lease and/or occupy the premises, the applicant agrees that the entire deposit herein provided will be forfeited to compensate the Landlord or Landlord's Agent for vacancy and/or damages suffered. In all instances, the disposition shall conform with the Landlord-Tenant laws of the State of Illinois

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

Applicant's Name: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Drivers License Number \_\_\_\_\_ (Attach Copy)

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

## CURRENT RESIDENCE

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Rent \$ \_\_\_\_\_ How Long at this address? \_\_\_\_\_

Current Landlord: \_\_\_\_\_ PHONE # \_\_\_\_\_

**PREVIOUS RESIDENCE (IF above less than 1 year)**

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Current Rent \$ \_\_\_\_\_ How Long at this address? \_\_\_\_\_

Current Landlord: \_\_\_\_\_ PHONE # \_\_\_\_\_

**EMPLOYMENT**

Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per month. How Long? \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Supervisor \_\_\_\_\_ Supervisor Phone \_\_\_\_\_

>> If less than 2 years, please provide name, address, and number of previous employer.

Previous Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per month.

How Long? \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Supervisor \_\_\_\_\_ Supervisor Phone \_\_\_\_\_

**SPOUSE**

Spouse's Name: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security #: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Drivers License Number \_\_\_\_\_ (Attach Copy)

PHONE: \_\_\_\_\_ CELL/E-MAIL \_\_\_\_\_

Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per month How Long? \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Supervisor \_\_\_\_\_ 5 Supervisor Phone \_\_\_\_\_

>> If less than 2 years, please provide name, address, and number of previous employer.

Previous Position \_\_\_\_\_ Income \$ \_\_\_\_\_ per month. How Long? \_\_\_\_\_

Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Supervisor \_\_\_\_\_ 5 Supervisor Phone \_\_\_\_\_

**GROSS MONTHLY INCOME**

	<b>Applicant</b>	<b>Spouse</b>	<b>Total</b>
Base Salary			
Bonus & Commissions			
Other Income			
Source			
Total Monthly Income			

**ASSETS**

	<b>Value / Amount</b>	<b>Bank / Institution</b>
Checking Account		
Savings Account		
IRA/CD/MM/Stocks		
Other Liquid Assests		

**DESCRIPTION OF VEHICLES**

	<b>Make</b>	<b>Model</b>	<b>Year</b>	<b>Color</b>	<b>License Number</b>	<b>State</b>
1.						
2.						
3.						

**OTHER INFORMATION**

LIST NAMES AND AGES OF DEPENDENTS THAT WILL BE RESIDING WITH YOU:


LIST TYPE AND AGE OF ANY AND ALL PETS THAT WILL BE RESIDING WITH YOU:

Name	Type	Weight	Breed

**OBLIGATIONS & DEBTS**

	Bank / Lender	Balance	Monthly Payment
Automobile 1			
Automobile 2			
Loan			
Credit Card 1			
Credit Card 2			
Other			
		<b>Total Montly Dedt</b>	

Have you ever filed for bankruptcy? \_\_\_\_\_ When? \_\_\_\_\_

Have you ever had a lien or judgement placed against you? \_\_\_\_\_

Explanation: \_\_\_\_\_

**IN CASE OF EMERGENCY**

IN CASE OF EMERGENCY, LIST TWO RELATIVES NOT LIVING WITH YOU:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

This information is presented with the understanding that it may be used as a basis for the acceptance of a lease. The undersigned hereby authorizes the agent to disclose to the Landlord, cooperating brokers all or any portions of the information contained in this financial information sheet. I/We certify the information above to be true and accurate to the best of my (our) knowledge and by our signature(s) acknowledge receipt of a copy of this financial sheet. I authorize **Kale Realty** to submit to a credit bureau the information necessary to obtain a consumer credit report and to obtain employment and residency verifications, information and payment history.

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

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

**Kale Realty** accepts checks, cash and all major credit cards- **Amount \$** \_\_\_\_\_

Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expires \_\_\_\_\_ Authorized Signature \_\_\_\_\_

Billing Address \_\_\_\_\_

\_\_\_\_\_