

Non-refundable \$25 application fee and background check required per applicant age 18 years and older.

**CASH OR MONEY ORDER ONLY** 

Applications kept on file for 6 months

For Office Use Only:
Application Date:/
Photo ID on file?  Application Fee Paid?  Date:
Unit Applied for:
Entered In PropertyWare:   Applicant   Wait List   Tenant
Preferred Property: # bedrooms # bath
<b>Desired Rent Range:</b> \$ to \$

Return your COMPLETED application(s) and application fee(s) to: 234 E. Main Street, Greenville, Ohio 45331. Incomplete applications will not be accepted.

Full Legal Name:	Previous/Maiden Name:		
SSN: Date of Birth:	Counties Resided In (include all states):		
Home Phone: Work Phone:	Cell Phone:		
E Mail Address:	ID/Driver License State: Number:		
Current Address: (where you live right now)	Previous Address: (where you last received mail)		
Address: Apt #	Address: Apt #		
City: State: Zip:	City:State:Zip:		
Landlord's Name:	Landlord's Name:		
Landlord's Phone:	Landlord's Phone:		
Reason for Moving:	Reason for Moving:		
Monthly Rent/Mortgage:	Monthly Rent/Mortgage:		
Date Moved In:Out:	Date Moved In:Out:		
Do you rent this residence? Yes No Is your name on the lease? Yes No Did you give written notice to leave? Yes No	Did you rent this residence? Yes No Was your name on the lease? Yes No Did you give written notice to leave? Yes No		
Income: Please provide complete information for income verification. If not en	nployed, please provide written proof of income.		
Current Employer:	Previous Employer:		
Phone Number:	Phone Number:		
Your Position:			
Your Start Date:	Your Start Date: End Date:		
Monthly Salary:	Why did you leave job?		
Your Personal History: Have you ever			
been asked to move out or evicted?  declared bankruptcy?  been sued for damage to a rental unit?  If "yes" for any of these, please explain:	been sued for non-payment of rent? Yes No When?		

Other Residents: List the names a	and ages of all other people who v	vill occupy this unit				
All residents 18 or older must subm	nit an application					
	age:		age:			
	age:		age:			
	age:	<del>_</del>	age:			
Pets Do you have any	pets? YES NO If yes, how m	any, what kind and v	what size(s)?			
Smoking Do you or any ho	ousehold members smoke? YI	ES NO If yes, wh	here do you smoke?			
In Case of Emergency (Not some	ne you are applying with)					
Emergency Contact:		Phone:	:_HC			
Address:		City:	State: Zip:			
Personal References (Not someone you are related to)						
#1 Reference Name:						
Relationship:		Phone:	:_HC			
Address:		City:	State: Zip:			
#2 Reference Name:						
Relationship:		Phone:	:_HC			
Address:		City:	State:Zip:			
How Did You Hear About EB Real	Estate?					
		□ Referral:				
□ Facebook □ Other:						
Disclosure:						
This form, which you should read carefully, has been provided to you because EB Real Estate may request consumer reports and/or investigative consumer reports on you from a consumer reporting agency. EB Real Estate will use such report(s) solely for Rental Application purposes. Such reports may be obtained from a background check vendor and /or public agency and provided to EB Real Estate. The types of information that may be obtained include but are not limited to: Social Security Number verification, criminal records check, public court records checks, driving records checks, state tax information, etc.						
Authorization and Release:						
I have carefully read and understand this Disclosure, Authorization and Release. By my signature below, I consent to the release of consumer reports and investigative consumer reports to EB Real Estate in conjunction with my Rental Application. I also authorize disclosure to EB Real Estate and/or to the background check vendor of information concerning my employment history, earnings history, credit history, credit capacity and credit standing, motor vehicle history and standing, criminal history, state tax information, and all other information EB Real Estate deems pertinent by any individual, corporation, or other private or public entity, including without limitation the following: employers; law enforcement agencies; federal, state and local courts; the military; credit bureaus; motor vehicle records agencies; and other applicable sources. I hereby release and hold the vendor and EB Real Estate, its members, officers, employees and agents harmless from any and all liability with respect to the investigations, reports, verifications and/or the use of any information relevant to the Rental Application.  This Disclosure, Authorization and Release, in original, faxed, photocopied, or electronic form, will be valid for any reports that may be requested by EB Real Estate.						

I understand that providing any false information or omitting any material information on my Rental Application may be sufficient grounds for rejection of the application or termination of any subsequently executed Residential Lease Agreement.

**OPPORTUNITY** 

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