

Rental Application

Applicant Information

Name:			
DL# or State ID#:		SSN:	Phone:
Date of birth:		Birth City:	Birth State:
Current address:			
City:		State:	ZIP Code:
Own	Rent	(Check One)	Monthly payment or rent: How long?
Name and number of current landlord (if applicable):			
Previous address:			
City:		State:	ZIP Code:
Owned	Rent	(Check One)	Monthly payment or rent: How long?
Name and number of previous landlord (if applicable):			

Employment Information

Current employer:			
Employer address:			
City:		State:	ZIP Code:
Phone:		Length of employment:	
Job title:		Hourly	Salary (Check One) Monthly income:

Emergency Contact

Name of a person not residing with you:			
Address:			
City:		State:	ZIP Code: Phone:
Relationship:			

Co-applicant Information

Name:			
DL# or State ID#:		SSN:	Phone:
Date of birth:		Birth City:	Birth State:
Current address:			
City:		State:	ZIP Code:
Own	Rent	(Check One)	Monthly payment or rent: How long?
Name and number of current landlord (if applicable):			
Previous address:			
City:		State:	ZIP Code:
Owned	Rented	(Check One)	Monthly payment or rent: How long?
Name and number of previous landlord (if applicable):			

Co-applicant Employment Information

Current employer:			
Employer address:			
City:		State:	ZIP Code:
Phone:		Length of employment:	
Job title:		Hourly	Salary (Check One) Monthly income:

References

Name:	Address:	Phone:

Personal Background

	YES	NO
Have you or any member of your household ever engaged in felonious use, possession or manufacture of methamphetamine or other drugs, or been ARRESTED for any drug related criminal activity?		
Have you or any member of your household ever been arrested for a criminal activity other than a traffic violation?		
Are you or any household member subject to a registration requirement under a state sex offender registration program?		
Have you or any member of your family been a party to any suits, judgements, collections, foreclosures, or bankruptcies?		
Are you a current user of illegal drugs?		
Do you abuse alcohol to the extent that you are a danger to the others' health, safety, or right to peaceful enjoyment?		
Have you ever been evicted, had property foreclosed upon or requested to vacate a property?		
Have you ever refused to pay rent?		
Have you ever had your wages garnished?		
Have you ever had a security deposit not refunded?		
Have you ever broken a lease?		
Have you ever sued a landlord or included a landlord in a bankruptcy?		
Have you ever been sued for or accused of damaging rental property?		
Are you subject to being transferred with your job?		
Do you know of anything that may interrupt your ability to pay rent?		
Is there anything to prevent you from placing utilities in your name?		
Do you or anyone named on this application smoke?		
Do you or anyone named on this application intend on owning a pet at this unit?		

Applicant Certification & Notice

I understand that I am required to report in writing all changes of address and/or all changes in household composition, drug and criminal activity, income of any household member within fifteen (15) days of the change. I also understand that no one is permitted to move into my unit without prior written approval of my landlord.

I certify that all information given regarding household composition, income, allowances, personal background, and rental history is accurate and complete to the best of my knowledge and belief.

I further understand that by signing this applicaitn, I give permission to process for credit and criminal references, including rental history and a POLICE CHECK to support the information I have provided.

Signatures – All adult household member (18+) must sign this form

_____	_____
Signature	Date

Printed Name	
_____	_____
Signature	Date

Printed Name	

Please return applications to:

CAS Rentals, Inc.
 4697 E Elbow Ln
 Olney, IL 62450