

Campus Cribs, LLC

Rental Application

Name		Social Security#
Present Address	City, State, Zip	Cell Phone#
Permanent Address	City, State, Zip	Home Phone#
Date of Birth		Drivers License#
Email		
Vehicle Make, Model, Color		License Plate#

RENTAL HISTORY

Present Landlord	Address	Phone #
Previous Landlord	Address	Phone #
Check if applicable:	0	Been evicted or asked to move out
	0	Broken a lease contract
	0	Been delinquent to a landlord

Employer	Supervisor	Phone #
Emergency Contact	Relationship	Phone #

How did you hear about us? _____

Pets? _____
Breed Total Lbs

I declare that the foregoing information is true and correct. I authorize its verification and the obtaining of a credit report. I agree that Landlord may terminate any agreement entered into in reliance on any misstatement made above.

Agent: _____ Applicant: _____
Signature Date Signature Date