1425 W. Elliot Rd. Suite A105 Gilbert, AZ. 85233 (480) 221-7634 Phone (866) 887-9267 Fax

ATTENTION: PLEASE LIST REAL ESTATE AGENT'S NAME AND AGENT'S I D # ON APPLICATION APPLICATION INSTRUCTION SHEET

- 1) Each applicant must fill out separate application unless they are a married couple.
- 2) Each applicant MUST sign application.
- 3) Photo identification <u>MUST</u> be submitted with application
- 4) Please complete all areas of application in order to process quickly, incomplete information will delay processing.
- 5) Landlord and Employment Verification should be signed at the bottom of form ONLY!!! Applicant should NOT fill in information.
- 6) All the above documentation <u>MUST</u> be submitted in order to complete the application process.

SWANS Realty & Property Management RENTAL AP



1425 W. Elliot Rd. Suite A 105, Gilbert, Az. 85233 480-221-7634 Fax 866-887-9267 (866-885WANS) Office 480-221-7634 Fax 866-887-9267 (866-885 WEBSITE: www.swansproperties.com EMAIL: contact@swansproperties.com

REAL ESTATE AGENT NAME & ID #

MOVE IN DATE

EACH APPLICANT MUST SUBMIT SEPARATE APPLICATIONS UNLESS MARRIED

\$ 50.00 APPLICATION FEE / \$ 20.00 ADDITIONAL OCCUPANTS 18 yrs. old and over** PICTURE ID REQUIRED

PROPERTY ADDRESS APPLYING FOR Applicant Information Name: **EMAIL ADDRESS:** Date of birth: SSN: Phone: Current address: City: State: ZIP Code: Landlord: Landlord Phone: Own (Please circle) Rent Monthly payment or rent: How long? Previous address: City: State: ZIP Code: Landlord: Landlord Phone Owned Rented (Please circle) Monthly payment or rent: How long? **Employment Information** Current employer: Employer address: How long? Phone: Supervisor: Supervisor Email: City: State: ZIP Code: Alternate Phone: Position: Hourly Salary (Please circle) Annual income: **Previous Employment** Previous employer: Employer address: Phone: Supervisor: How long?: City: Reason for leaving: Position: Hourly Salary (Please Circle) Annual Income: Co-applicant Information, if Married Name: **EMAIL ADDRESS:** Date of birth: SSN: Phone: Current address: City: State: ZIP Code: Landlord: Landlord Phone: (Please circle) Own Rent Monthly payment or rent: How long? Previous address: City: State: ZIP Code: Landlord: Landlord Phone: Owned Rented (Please circle) Monthly payment or rent: How long? Co-applicant Employment Current employer: Employer address: How long? Phone: Supervisor: Supervisor Email: City: State: ZIP Code: Alternate Phone: Position: Hourly Salary (Please circle) Annual income: Co-applicant Previous Employment Previous employer: Employer address: Phone: Supervisor: How long? City: Reason for leaving: Position: Hourly

Salary (Please Circle)

Annual Income:

Applicant	Vehicles	and Drive	r's Lice	nse Informat	ion					
Applicant Drivers License #:				State:				Exp:		
Co-applicant Driver's license #:				State:	State: Exp:					
Type of Vehicles:				Licens	License Plate:					
Type of Vehicles:				Licens	e Plate	:				
Type of Vehicles:				License Plate:						
List Other	Residen	ts (Total #	:) ı	se addition	al page	if ne	cessa	ry.		
Name:						Rela	tionship:			Age:
Name:					Relationship:			Age:		
Name:				Relationship:			Age:			
Name:				Relationship:				Age:		
Other Sou	rces of I	ncome			0.55					
If there are of we could cont consider it in	act for confi	rmation. You d	would like o not have	us to consider, pl to reveal alimony	ease list i , child su	ncome pport,	, source, or spous	and person e's annual in	(banker, emplo ncome unless yo	oyer, or etc) who ou want us to
Income:		Source:			Income	e:		Source:		
Pets								7.91.2		
Type:	Breed:		Age:	Size:	Type:		Breed:		Age:	Size:
Type:	Breed:		Age:	Size:	Type:		Breed:		Age:	Size:
Additional	Informa	tion								
explain:				If so, please	_	rent	when du	e?	If so, please ex	plain:
nave you eve	r filed for Ba	inkruptcy?	If S	o, wnen		Day F	Phone # Phone #	() ()		аррисацоп:
Emergenc										***************************************
Name of a per	rson not resi	ding with you:								
Address:										
City:		S	tate:		740		ZIP Co	de:	Phone:	
Relationship:										
sign a rental or residency. Upo to hold the pro In the event a	r lease agree on approval o operty off the pplicant is ac or changes t olding the pr	ement and to particate of your applicate erental market excepted and has their decision o	ay all sums ion, an ear Applicant s paid earn n occupanc	erms and condition due, including rendered deposit will be agrees to sign least deposit but fact for whatever recet.	quired de be require ase in the ils to ente	posits. d with standa er into t	The appl in 24 ho rd form the renta	lication fee i urs by cashi required by Il agreement	s not a guarante ers check or oth management. t or fails to take	ee of approval for er certified funds occupancy on the
Reference	s									
Name:			Address:		- Contraction	The state of the s			Phone:	
Name: Address:						Phone:				
an investigat	tion of my	tion of the in credit, tenan this propert	t history,	n provided on t banking, emplo	his form byment,	as to crimir	my cree	dit and em (ground, a	ployment. I a	ngree to permit screening for
Signature of applicant:								Date:		
Signature of co	o-applicant:								Date:	

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Office number: 480-221-7634 Fax number: 866-887-9267

(ATTENTION APPLICANT**DO NOT FILL OUT FORM**SIGN AT BOTTOM ONLY)

LANDLORD VERIFICATION

Applicant Name	Property Address applying for					
Today's Date						
Present Landlord	Phone	Fax				
Applicant Current Address						
obtain information about their account. In	order to better evaluate their past page it back to us at the number liste	en permission has been given to contact you to performance, we ask your cooperation in filling d above. We appreciate your prompt attention to any third parties. Thank you.				
Date moved in: Date mov	ved out (If they have moved):					
Lease expiration date:	Has proper notice been given	1?				
Payment History [] Never Late [] Son	netimes Late [] Always Late	If late how many times				
If late was eviction ever begun? [] Yes		d years:				
Any lease violation notices? [] Yes []						
Any move-out damages? [] Yes [] No	Explain:					
Any pets? [] Yes [] No If yes wha	t type and how many?					
Were yards maintained? [] Yes [] No	Explain:					
Any balance owing? [] Yes [] No Ex	plain:					
Would you rent to tenants again? [] Ye	es [] No Explain:					
Any comments to assist us?						
Information supplied by:	Title:	Phone:				
epresented.	cessary to investigate applicant. ledge. Landlord reserves the righ O RELAESE INFORMATION ABOU					

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(ATTENTION APPLICANT***DO NOT FILL OUT FORM**SIGN BOTTOM ONLY)

EMPLOYMENT VERIFICATION

Applicant Name		
Today's Date		
Present Employer	Phone	Fax
Dear Employer: The above named person(s) have applied to lea obtain information about their employment wi information and then faxing it back to us at the information obtained will be held in strict confidence.	ith your company. We ask your co e number listed above. We appre	poperation in filling out the following ciate your prompt attention and all
How long has applicant been employed wi	th your company?	
What is the current salary they are making	g?	
Position helded?		
Supervisor Name?		
Is applicant full time?	Or part time?	
Information supplied by:	Title:	Phone:
Applicant authorizes the landlord to contact neighbors, and other sources deemed necest complete to the best of applicant's knowled represented. ANY PERSON OR FIRM IS AUTHORIZED TO ROF THIS FORM OR A PHOTOCOPY OF THIS F	ssary to investigate applicant. A ge. Landlord reserves the right RELAESE INFORMATION ABOUT	ll information is true, accurate and to disqualify tenant if information is not as
APPLICANT SIGNATURE DATE	DATE	APPLICANT SIGNATURE

Swans Realty & Property Management

DATE

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Applicant Name		
Applicant Name		
Today's Date		
Present Employer	Phone	Fax
Dear Employer: The above named person(s) have applied to obtain information about their employment information and then faxing it back to us at information obtained will be held in strict c	t with your company. We ask your co t the number listed above. We appre	ciate your prompt attention and all
How long has applicant been employed	with your company?	
What is the current salary they are mak		
Position helded?		
Supervisor Name?		
Information supplied by:	Title:	Phone:
epresented.	cessary to investigate applicant. A ledge. Landlord reserves the right ORELAESE INFORMATION ABOUT	nployers, creditors, credit bureaus, Il information is true, accurate and to disqualify tenant if information is not a THE UNDERSIGNED UPON PRESENTATION
APPLICANT SIGNATURE	DATE	APPLICANT SIGNATURE