

NORTH HILL PARK APARTMENTS
555 E. Limberlost Rd.
Tucson AZ 85705
(520) 888.5139
(520) 888.1733 fax

Apt. # _____
Rent: _____
M/I Date: _____
App. Fee: _____
Deposit: _____

RENTAL APPLICATION

PLEASE TELL US ABOUT YOURSELF

Last Name: _____ First: _____ Initial: _____ Jr/Sr/2nd: _____
Social Security #: _____ Date of Birth: _____ Phone #: _____
E-mail: _____
Pets (Number, Kind & Name) _____

PLEASE GIVE YOUR RESIDENCE HISTORY

Current Address _____ City _____ ZipCode _____
Month & Year Moved In _____ Reason for Leaving _____
Present Landlord _____ Phone _____ Rent \$ _____
Previous Address _____
Date Moved In _____ Date Moved Out _____ Reason _____
Landlord _____ Phone _____ Rent \$ _____
Previous Address _____ From _____ To _____

PLEASE GIVE YOUR EMPLOYMENT INFORMATION

Current Employer _____ Length of Employment _____
Address _____
Employer Phone # _____ Employer Fax # _____ Supervisor _____
Position Held _____ Salary \$ _____ per _____
Previous Employer _____ Length of Employment _____
Address _____
Employer Phone # _____ Employer Fax # _____ Supervisor _____
Position Held _____ Salary \$ _____ per _____
Additional Income Amount: \$ _____ per _____ Source _____

VEHICLE INFORMATION

Your Driver's License Number _____ State _____
Vehicle Make/Model _____ Color _____ Year _____ Tag # _____ State _____
Vehicle Make/Model _____ Color _____ Year _____ Tag # _____ State _____

APARTMENT OCCUPANTS

Occupant Name _____ Date of Birth _____
Occupant Name _____ Date of Birth _____
Occupant Name _____ Date of Birth _____
Occupant Name _____ Date of Birth _____

OTHER INFORMATION

- Have you ever:
- 1. Filed for bankruptcy? ___ Yes ___ No
 - 2. Been evicted from tenancy? ___ Yes ___ No
 - 3. Willfully or intentionally refused to pay rent? ___ Yes ___ No
 - 4. Been convicted of a crime? ___ Yes ___ No

Please give any additional information which might help management evaluate this application:

IN CASE OF EMERGENCY

Notify _____ Phone _____
Address _____ Relationship _____

I, the undersigned, hereby make application to lease apartment # _____ for a period of 12 months. I hereby tender a non-refundable fee of \$35.00 per person for processing this application. I represent that the information set forth on the application is true and complete; and hereby authorize verification of any and all of the information set forth above, including a consumer credit report or other such information as may be required to evaluate this application. The credit check and other such information becomes the sole possession of ELK North Hill LLC and no copies will be given to the applicant.

Upon notification of acceptance of the application, the Applicant agrees to execute a lease and pay the \$200/\$250 security deposit within three business days. Should the Applicant fail to perform his/her obligations as stated herein, the deposit shall be retained by Management in consideration of reserving said apartment. In the event this application is not approved by Management, said deposit shall be refunded. In the event the apartment is not ready for occupancy by said date, the Applicant agrees to extend his/her reservation or may choose to cancel and forfeit the \$200/\$250 security deposit. Applications are subject to approval of ELK North Hill LLC. No oral agreements have been made.

Signature of Applicant: _____ Date: _____

Application Received By: _____ Date: _____

NORTH HILL PARK

555 East Limberlost Road

Tucson, AZ. 85705

Tel: 520.888.5139

Fax: 520.888.1733

**REQUEST FOR
RESIDENCY
VERIFICATION**TO _____

_____VIA: MAIL
 FAX
 PHONE_____
DATE: _____

The person named below had applied for an apartment rental with us. You were listed as having rented to the applicant. The applicant, by his/her signature below, has authorized you to release information about prior residency. Your comments or recommendation on this matter will be sincerely appreciated. We will be pleased to reciprocate this favor in the future. Thank you.

RE: Resident's Name: _____
Occupancy Address: _____

REQUEST SUBMITTED BY:	TITLE:	PHONE:

APPLICANT'S AUTHORIZATION OF THIS INQUIRY:

I hereby consent to the release of my residency information.

Resident's Signature_____
Date**PROPERTY OWNER'S OR MANAGEMENT AGENT'S COMMENTS**

Date Moved In _____ Date Moved Out _____ Still an Occupant? _____

Amount of Monthly Rent \$ _____ Utilities Included _____

Rent Generally Paid: On Time Occasionally Late Often LateHousekeeping Habits: Good Average PoorWould you probably rent to this person again? Yes No Not Sure

Signature _____ Title _____ Date _____