

RENTAL APPLICATION

Landlord: Carrington Place Apartments
Phone: 801-298-2835 Text: 801-702-6306
Property Address: 830 North 500 West, Bountiful, UT 84010

Move In Date : _____
Lease Term: _____
Unit # _____ Rent Amt: \$ _____
☐ Application Fee: \$40.00 each
☐ Paystub, Offer Letter, Income Documentation
Email: carringtonplc@gmail.com

Phase 1 Criteria: 600+ Credit Score and 3X Rent Monthly Income. **Phase 2 Criteria:** 700+ Credit Score and 3X Rent Monthly Income.

INSTRUCTIONS: FILL OUT COMPLETELY AND LEGIBLY IN BLUE OR BLACK INK!

APPLICATIONS WHICH ARE NOT COMPLETED FULLY OR SIGNED WILL BE REJECTED. IDENTIFICATION WILL BE REQUIRED BY MEANS OF PHOTO ID TO CONFIRM IDENTITY AND PROOF OF VALID SOCIAL SECURITY NUMBER BY DRIVERS LICENSE, STATE ID, OR SS CARD.

APPLICANT

☐ SR ☐ JR ☐ II ☐ III

Full Legal Name

Social Security #

Date of Birth

Driver's License #

State Issued and Expiration

Automobile

year, make, model

License Plate #

E-mail Address

Cell Phone #

Have you ever been convicted or charged with a felony or misdemeanor? ☐ Yes ☐ No

If yes please give details:

RESIDENTIAL HISTORY

Current Address

Your Phone #

City

State

Zip Code

Landlord / Mtg Co

☐ Rent ☐ Own ☐ Live with family

Landlord Phone #

Current Rent Amount

Date Moved In

Reason for Move

Lease Expires

Have you Given Notice?

Previous Address

Rent Amount

City

State

Zip Code

Landlord / Mtg Co

Landlord Phone #

Date Moved In

Date Moved Out

Reason for Move

☐ Rent ☐ Own ☐ Live with family

Have you ever been evicted or refused to pay rent when due?: ☐ Yes ☐ No

If Yes, When, Where:

OCCUPANTS UNDER THE AGE OF 18

Name

Relationship

Date of Birth

1

2

3

4

MARKETING/REFERRAL SOURCE

Primary

Other

Other

<u>APPLICANT EMPLOYMENT HISTORY</u>					
Current Employer	<input type="checkbox"/> Self Employed		Phone #		
Address					
Nature of Business					
Position			Start Date		
Pay Rate	\$	Per	HOUR	WEEK	MONTH
Supervisor			Hours Weekly		
			Direct Phone #		
↓ PLEASE CHECK ONE: <input type="checkbox"/> Second Employer <input type="checkbox"/> Previous Employer (If Current Less Than Two Years) ↓					
Second Employer	<input type="checkbox"/> Self Employed		Phone #		
Address					
Nature of Business					
Position			Start Date	End Date	
Pay Rate	\$	Per	HOUR	WEEK	MONTH
Supervisor			Hours Weekly		
			Direct Phone #		
<u>FINANCIAL INFORMATION</u>					
Bank Name		Branch and Phone #		Account #	
ADDITIONAL INCOME (List any alimony, child support, separate maintenance, or other monetary assistance. Please provide documentation or contact information for verification purposes)					
Have you ever filed bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No					
If yes when, where, and who?					
<u>OTHER INFORMATION</u>					
Any pets: <input type="checkbox"/> Yes <input type="checkbox"/> No Describe Type/Age/Weight:					
Do you have or plan to maintain renters insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No					
How many smokers/vapors within household? _____			Please list each:		
In case of emergency contact:		Relationship	Phone:	Address:	
1					
2					
Personal References:		Relationship:	Phone:	Address:	
1					
2					
Subject to owner's approval, the undersigned hereby makes application to the apartment described above for the term and at the rental herein set forth. As an inducement to the owner to approve this application the undersigned warrants that all of the representations set forth in this application and agreement are true. I agree that the landlord may terminate any agreement entered into reliantly or any misstatements made above.					
<u>AUTHORIZATION</u>					
I, the under-signed certify that the information given is accurate. I give my authorization to the above named Landlord to verify any and all information above, including but not limited to access my credit history through the national credit bureaus and/or my creditors, verify my criminal background, obtain references from current/past landlords and employers (including income verification), bank and personal references. I further agree that a photocopy of this authorization may be accepted with the same authority as the original. Any paid deposit will be refundable within 72 hours of this application should applicant cancel. All persons will be treated fairly and equally without regard to race, color, religion, sex, family status, disability, national origin, or source or income. Applicant also affirms that all occupants of the leased premises are and will be legally residing in the United States.					
Applicants Signature		Date		Agent or Owner	