

JOINT RENTAL APPLICATION

1620 South Enterprise Avenue Springfield, MO 65804

Office: (417) 890-8718 Fax: 417-890-8719

Èmail: walkaboutcreek@sbcglobal.net Website: walkaboutcreekproperties.com

**\$35.00 Application Fee Required with return of Application.

				e Neede				_	
1. Applicant # 1 Name:						Date of I	Birth:	I	
	First		Last		Middle Initial				
Social Security Number			Drivers License No	umber ₋			l	ssuin	g State:
(1) <u>Your</u> Phone #			(2) Alternate	#					
Email Address:									
2. Applicant # 2 Name:						Date of I	Birth:	1	1
	First		Last		Middle Initial				
Social Security Number	-		Drivers License No	umber _			I	ssuin	g State:
(1) <u>Your</u> Phone #			(2) Alternate	#					
Email Address:									
ADDRESS									
3. Present Address									
	Address			ity			State		Zip
How long?	Monthly Payment: \$_		Was Proper Notice	Given					
Landlord Name			Phone Number	·					
Reason for Leaving?									
(IF LESS THAN TWO YE	ARS. Provide Previous	s Address)							
(IF LESS THAN TWO YEA		s Address)							
(IF LESS THAN TWO YEA		s Address)	C	iitv			State		Zip
4. Previous Address:	Address			ity • Given			State		Zip
4. Previous Address:	Address Monthly Payment: \$_		Was Proper Notice	Given					Zip
4. Previous Address: How long? Landlord Name	Address Monthly Payment: \$_	,	Was Proper Notice Phone Number	Given					Zip
4. Previous Address: How long? Landlord Name	Address Monthly Payment: \$_	,	Was Proper Notice Phone Number	Given					Zip
4. Previous Address: How long? Landlord Name Reason for Leaving? APPLICANT #1	Address Monthly Payment: \$_		Was Proper Notice Phone Number	Given					·
4. Previous Address: How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name:	Address Monthly Payment: \$_		Was Proper Notice Phone Number How	Given					·
4. Previous Address: How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address	Address Monthly Payment: \$_		Was Proper Notice Phone Number How	Given::					·
4. Previous Address: How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work?	Address Monthly Payment: \$_	Title	Was Proper Notice Phone Number How Supervisor N	Given					_
4. Previous Address: How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work?	Address Monthly Payment: \$_	Title	Was Proper Notice Phone Number How Supervisor N	Given					_
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work	Address Monthly Payment: \$_	Title	Was Proper Notice Phone Number How Supervisor N	Given					_
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2	Address Monthly Payment: \$	Title_ Tay Rate \$	Was Proper Notice Phone Number How Supervisor N	dong? Name: _	Bi-Weekly	Monthly ((2 Recent Pa	 - ay Sti	 ubs Required
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2 6. Employer Name:	Address Monthly Payment: \$	Title	Was Proper Notice Phone Number How Supervisor N Per:	e Given long? Name: _ Week	Bi-Weekly	Monthly ((2 Recent Pa	 ay Sti	ubs Required
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2 6. Employer Name: Address Kind of work? Address Kind of work?	Address Monthly Payment: \$P	Title_ Pay Rate \$ Title_	Was Proper Notice Phone Number How Supervisor N Per: How Supervisor N	e Given .: long? Name: _ Week long? Name: _	Bi-Weekly	Monthly ((2 Recent Pa	 - ay Str	ubs Required
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2 6. Employer Name: Address Kind of work? Address Kind of work?	Address Monthly Payment: \$	Title_ Pay Rate \$ Title_	Was Proper Notice Phone Number How Supervisor N Per: How Supervisor N	e Given .: long? Name: _ Week long? Name: _	Bi-Weekly	Monthly ((2 Recent Pa	 - ay Str	ubs Required
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2 6. Employer Name: Address Kind of work? Phone at work	Address Monthly Payment: \$P	Title_ Pay Rate \$ Title_ Pay Rate \$	Was Proper Notice Phone Number How Supervisor N Per: How Supervisor N Per:	long? Name: _ Veek	Bi-Weekly	Monthly ((2 Recent Pa	 - ay Str	ubs Required
How long? Landlord Name Reason for Leaving? APPLICANT #1 5. Employer Name: Address Kind of work? Phone at work APPLICANT #2 6. Employer Name: Address Kind of work? Phone at work 7 List ALL vehicles to be par	Address Monthly Payment: \$P	Title Pay Rate \$ Pay Rate \$ Uding those of	Was Proper Notice Phone Number How Supervisor N Per: How Supervisor N Per:	long? Name: _ Week	Bi-Weekly Bi-Weekly remises:	Monthly ((2 Recent Pa	- ay Sti	ubs Required

FOR OFFICE USE ONLY

Application Fee \$_____ Date Paid _____ Deposit Amount \$_____ Date Paid_____

o. List All Name, Ages, and relationship that will be occu	pied in this nome.
(1)	(2)
(3)	
9. Pets? DOG CAT OTHER How Many?YOU MUST PROVID	Breed/Weight? DE A PICTURE(S) OF ANY PETS WITH THE APPLICATION
10. Have you ever been evicted or broke a lease?	
11. Have you ever been sued for non-payment of rent o	r damage? If yes, explain why
12. Have you ever received a late rent notice? Yes	No
	Yes No If Yes, type and date:
15. How long do you think you would be renting from us?	?
16. We will be running a Credit Check as well as a Crimi	nal Background Check, is there anything we may find on either that you wish to comment on?
Personal references (Please provide at least 2-List So Applicant #1: Applicant #2:	meone not living with you, If you are in Student Housing Please List your Parents.)
APPLICANT #1 14. In case of emergency, notify Name:	Number:
and make any legal decisions on your behalf?N	In case of emergency, illness, death, may this person have permission to enter the property May we contact this person at any time of concern
APPLICANT #2	
15. In case of emergency, notify Name: Relationship;	Number: In case of emergency, illness, death, may this person have permission to enter the property May we contact this person at any time of concern
and make any legal decisions on your behalf? N	May we contact this person at any time of concern
FOR OFFICE USE ONLY	

Application Fee \$_____ Date Paid _____ Deposit Amount \$_____ Date Paid_____

APPLICANT #1

Applicant represents that all of the information listed on the Application is ------

<u>CORRECT INFORMATION</u>, is true and complete and also acknowledges that false information herein may constitute a criminal offense under the laws of this state. Furthermore, applicant understands that false statements found herein may result in denial of application and render any future rental agreement null and void. I further understand that there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment or house. If approved, all monies deposited with this application will be held as a reservation deposit to be credited toward any deposit which may be required of applicant at the time a rental agreement is executed. If the house or apartment is held for the applicant for more than 7 days, all monies deposited shall be forfeited to Landlord as liquidated damages should the Applicant decide not to pursue leasing the property.

Authorization to Release Information Related to a Residential Lease Applicant

The landlord	l or landlord's r	epresentative	who will	verify information is:
				- ,

Landlord Name: Walkabout Creek Properties Name: Kapri Keyes Title: Property Ma	nager
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1620 S Enterprise, Springfield MO 65804 Phone: 417-890-8718 Fax: 417-890-8719

I give my permission:

- (1) To my current and former employers to release any information about my employment history and income history to the above named person.
- (2) To my current and former landlords to release any information about my rental history to the above named person.
- (3) To my current and former mortgage lenders on property that I own or have owned to release any information about my mortgage payment history to the above named person.
- (4) To the above named person to obtain a copy of my consumer report (credit report) from any consumer reporting agency and to obtain criminal background information about me.

	•		
X			
Applicant Signature		Today's Date	

**By Signing below I understand and agree to the information listed above regarding a background check.

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Application Fee \$	Date Paid	Deposit Amount \$	Date Paid
II			

APPLICANT #2

Applicant represents that all of the information listed on the Application is -----
CORRECT INFORMATION, is true and complete and also acknowledges that false information herein may constitute a criminal offense under the laws of this state. Furthermore, applicant understands that false statements found herein may result in denial of application and render any future rental agreement null and void. I further understand that there is a non-refundable fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment or house. If approved, all monies deposited with this application will be held as a reservation deposit to be credited toward any deposit

which may be required of applicant at the time a rental agreement is applicant for more than 7 days, all monies deposited shall be forfeite decide not to pursue leasing the property.	
Authorization to Release Information Rela	ited to a Residential Lease Applicant
The landlord or landlord's representative who will verify information	is:
Landlord Name : Walkabout Creek Properties Name : Kapri Keyes 1 1620 S Enterprise, Springfield MO 65804 Phone: 417-890-8718 Fax	·
I give my permission:	
(1) To my current and former employers to release any information a above named person.	about my employment history and income history to the
(2) To my current and former landlords to release any information al	bout my rental history to the above named person.
(3) To my current and former mortgage lenders on property that I ov mortgage payment history to the above named person.	vn or have owned to release any information about my
(4) To the above named person to obtain a copy of my consumer re and to obtain criminal background information about me.	port (credit report) from any consumer reporting agency
**By Signing below I understand and agree to the information li	isted above regarding a background check.
X	
Applicant Signature	Today's Date

FOR OFFICE USE ONLY Application Fee \$_____ Date Paid _____ Deposit Amount \$ _____ Date Paid _____