## **RENTAL APPLICATION**

Each applicant must submit a separate application. PLEASE PRINT IN BLACK INK.

COMMUNITY NAME						Referred By					COMMUNITY PHONE #				COMMUNITY FAX #				APT#			
Casa Tiempo Apartments						MyVegasApt.com					702-457-1760			702-457-7692			692	2				
APPLICANT'S LAST NAME FIRST MI MARITAL					MARITAL S	STATUS (CIRCLE ONE)			sc	SOCIAL SECURITY#			D.O.B. GENDER			DRIVER'SLICENSE # STATE						
					M	S	D	W									IVI	r				
APPLICANT'S LAST	r NAME	FIRST		MI	1	STATUS		W LE ONE)		SC	OCIAL SECURI	TY#			D.O.B.			NDER		DRIVER'SLICE	NSE #	STATE
					M	3	D										IVI					
		FULL NAME					RELATIO	•	MONTH	DOB DAY	YEAR			FULL NAME				RELATI		монтн	DOB	YEAR
OTHER PERSONS		FULL NAME					RELATIO	1	MONTH	DOB DAY	YEAR			FULL NAME				RELATI	ON	монтн	DOB DAY	YEAR
THAT WILL OCCUPY THE PROPERTY		ILL A PET OCCUPY THE PROPERTY?								1										I MONTH	DAT	TEAC
T KOI EKT	WILL A PET OCCUPY THE	YES NO			BREED			TYPE WEIGHT IS THE PI			IS THE PET F	T PROPERLY LICENSED & INOCULATED FOR RAE  YES				NO						
RESIDENCE HISTORY																						
PRESENT STREET ADDRESS  APT # CITY STATE ZIP CODE DATES OF OCCUPANCY  MOVE IN DATE / /																						
																			OUT DATE		1 I 1 I	,
PRESENT LANDLO	PRD/MORTGAGE COMPAN	Y/APARTMENT COMMUNIT	TY								MONTHLY F	AYMENT	LANDLORD	PHONE + ARE	A CODE				L.		CIRC	LE ONE
SPOUSE'S ADDRE	ee if Differential										STATE ZIP CODE			15			OWN RENT					
SPOUSE'S ADDRE	SS IF DIFFERENT				^-	T#			СПҮ		STA	TE	ZIP CODE					MOVE	IN DATE	•	1	,
SPOUSE'S LANDLO	ORD/MORTGAGE COMPAN	IY/APARTMENT COMMUNI	ITY								MONTHLY P	AYMENT	LANDLORD	PHONE + ARE	A CODE			MOVE	OUT DATE		CIRC	LE ONE
																					OWN	RENT
								E			T HISTO	DRY										
NAME OF PRESEN	T EMPLOYER								PHONE NUM	BER + AREA	CODE					DIRECT SUP	ERVISOR/HU	IMAN RES	OURCES			
EMPLOYMENT ADI	DRESS						STAR	T DATE	END	DATE	CURRENT P	OSITION HEL	D					GROSS I	NCOME (BEFOR	RE TAXES)		
NAME OF SPOUSE	'S PRESENT EMPLOYER	***************************************							PHONE NUM	BER + AREA	CODE					DIRECT SUP	ERVISOR/HL	IMAN RES	DURCES			
EMPLOYMENT ADDRESS								START DATE END DATE				CURRENT POSITION HELD			GROSS INCOME (BEFOR			RE TAXES)				
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AUT	0 #2	YEAR	MAKE							MODEL			arten and a same		COLOR					LICEN	ISE PLATE	STATE
Aoi	0 #2			VIII SI SENS																		
PERSONAL INFORMATION HAVE YOU OR YOUR SPOUSE EVER HAD AN EVICTION FILED AGAINST YOU? YES NO																						
HAVE YOU EVER BROKEN A RENTAL AGREEMENT?  YES NO																						
DO YOU CURRENTLY OWE ANY PRIOR LANDLORDS MONEY?  HAVE YOU OR YOUR SPOUSE EVER BEEN CONVICTED OF A CRIMINAL OFFENSE?  YES NO																						
HAVE YO	U EVER BEE					ATEC	CRI											Long	Y	/ES		10
NAME OF APPLICA	NIS NEAREST RELATIVE					TELEPHO	NE WITH A	REA CODE	ĺ	STREET AD	DRESS							CITY			STATE	ZIP CODE
NAME OF SPOUSE	'S NEAREST RELATIVE					TELEPHO	NE WITH A	REA CODE		STREET ADI	DRESS							CITY			STATE	ZIP CODE
EMERGENCY CON	TACT					WORK TE	LEPHONE	WITH AREA	CODE	HOME TELE	PHONE				STREET ADD	RESS			7	СПУ	STATE	ZIP CODE
THE ABOVE RESIDENT.	NAMED EMERO	GENCY CONTAC	CT IS AU	THORIZE	ED TO F	REMO\	/E AND	OR ST	ORE ALL	. CONTE	ENTS OF	THE DV	VELLING	AND/OR	MAILBO	X IN TH	E EVEN	T OF A	SERIOU	S ILLNES	SS OR DE	ATH OF
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AGREE DISAGREE SIGNATURE																						

## Rental Application Continued - Page 2

- NON-REFUNDABLE APPLICATION FEE\*\$\_\_\_\_\_\_ (Not refunded under any circumstance)
   Application Fee is applicable to each Resident 18 years or older regardless of marital status.
   HOLDING FEE\*\$
  - o Upon approval, this fee will be credited against future rent.
  - o Holding fee will be retained by the Community as liquidated damages in the event I do not choose to enter into into a lease agreement for the unit which I have applied for wit this application.
  - I understand that I acquire no rights in the apartment until I complete the application, pay the holding fee, and execute a lease on the apartment.

## \*APPLICATION FEE AND HOLDING FEE MUST BE PAID BY MONEY ORDER OR CASHIERS CHECK MADE PAYABLE TO THE PROPERTY

"I/We hereby authorize the Community to obtain a consumer report, and any other information it deems necessary, for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records or arrest, rental history, employment/salary details, vehicle records, licensing records, and/or necessary information. I hereby expressly release the Community, and any procurer or furnisher of information, from any liability what-so-ever in the use, procurement, or furnishing of such information, and understand that my application information may be provided to various local, state and/or federal government agencies, including without limitation, various law enforcement agencies.

I/We certify that, to the best of my knowledge, all statements are true and complete. False, fraudulent or misleading information may be grounds for denial of tenancy or subsequent eviction."

Applicant(s) Signature	) <i>:</i>						
APPLICANT'S SIGNATURE:	***************************************		DATE SUBMITTED: _		was the same of th		
CONTACT PHONE #	(	)	CIRCLE ONE:	HOME	WORK	CELL	OTHER
APPLICANT'S SIGNATURE:			DATE SUBMITTED: _				
CONTACT PHONE #	(	)	CIRCLE ONE:	HOME	WORK	CELL	OTHER
Agent Signature:							
AGENT FOR THIS OWNER:			DATE RECEIVED: _				