



PLEASE SEE THE UNIT BEFORE FILLING OUT AN APPLICATION!

Tpm Inc

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www.tpmrents.com

RENTAL APPLICATION NO SMOKING OR PETS!

INCOMPLETE FORMS WILL NOT BE CONSIDERED

APLICACIONES INCOMPLETAS NO SERAN ACEPTADAS

Nosotros no hablamos español. Necesitamos la comunicacion con todas las personas en la aplicacion. TPM no sera responsable si no entiende los detalles de su contrato, por favor, haga que alguien se lo traduzca.

Date Unit or units applied for Date needed? Been inside?

HOW DID YOU FIND THIS PROPERTY? newspaper internet yard sign bench ad friend other

How many in your family will be living in the apartment? Adults Children

**a separate application is necessary for each person over 18 years old.

Name Phone Spouse Cell Cell

Social Security # Birth date Driver's License

Do you smoke? Inside Outside Do you have pets? What kind?

Will you be receiving Utah County Housing? Yes No Provo City Housing? Yes No

Present Address City State Zip

Landlord's Name Phone Cell

How long at present address Do you have a current contract? Yes No

Reason for moving

Previous Address City State Zip

Landlord's Name Phone Cell

How long at previous address Did you have a contract? Yes No

Reason for moving

Your employer Position Salary

How long have you been employed there? Employer's phone Cell

Spouse Information ONLY—Fiancé or single roommates must submit a separate application

Name Do you smoke? Inside Outside

Social Security # Birthdate Driver's License

Spouse employer Position Salary

How long has spouse been employed there? Employer's phone Cell

Have you or your spouse ever:

Filed for bankruptcy? Yes What year? If yes, you will need a co-signer No
Been served an eviction notice? Yes For what reason No
Been asked to leave a property? Yes For what reason No
Willfully or intentionally refused to pay rent when due? Yes Reason No

DISCLOSURE: **ANY intentionally or knowingly false information will be sufficient cause for IMMEDIATE rejection of application**

LIST EACH PERSON WHO WILL OCCUPY THE PROPERTY

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Do you ever have visitors who stay longer than two weeks?

No _____ Yes _____ Family _____ Friends _____

Personal References Only: (One MUST be the nearest relative not living with you. Please make sure you do not repeat reference from the front page)

<u>NAME</u>	<u>RELATIONSHIP</u>	<u>TELEPHONE – CELL</u>
_____	_____	_____
_____	_____	_____

Number of vehicles (including company cars, recreational vehicles, etc., that will be parked on the property)

Make/Model _____ Year _____ Color _____ State registered _____

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I/We declare the foregoing information is true and correct, and I/we hereby authorize TPM to conduct an employment and credit check, to verify our references, rental landlords, and any other pertinent information, including a criminal background check.

Applicant's Signature Date Co-Applicant's Signature Date

FOR OFFICE USE ONLY – DO NOT WRITE BELOW

Present Landlord _____

Previous Landlord _____

Applicant's Employment _____ Verified Correct? _____

Co-Applicant's Employment _____ Verified Correct? _____

1st Reference _____

2nd Reference _____