

APPLICATION TO RENT

APPLICANT (Last Name, First Name, Middle Initial)			Daytime Phone	Fax #
Social Security Number — —	Date Of Birth / /	Drivers License #	State	Expiration Date / /
Home Phone	Cell Phone	E-Mail Address		
SPOUSE (Last Name, First Name, Middle initial)			Daytime Phone	Fax #
Social Security Number — —	Date Of Birth / /	Drivers License #	State	Expiration Date / /
Home Phone	Cell Phone	E-Mail Address		
NAMES OF ADDITIONAL OCCUPANTS			Relationship	Age
PET 1:		PET 2:		
Type _____	Weight _____	License # _____	Type _____	Weight _____
		License # _____		
CURRENT RESIDENCE:				Paid on Time? Y N
_____ (Street Address) _____ (City) _____ (State) _____ (ZIP)				Proper Notice? Y N
Name of Complex _____ Contact _____ Phone _____				Lease Violation? Y N
From ____/____/____ To ____/____/____ Monthly Payments _____				Re-rent? Y N
APPROVED: Y N				
PREVIOUS RESIDENCE:				Paid on Time? Y N
_____ (Street Address) _____ (City) _____ (State) _____ (ZIP)				Proper Notice? Y N
Name of Complex _____ Contact _____ Phone _____				Lease Violation? Y N
From ____/____/____ To ____/____/____ Monthly Payments _____				Re-rent? Y N
APPROVED: Y N				
CURRENT EMPLOYER:				Employed? Y N
_____ (Name) _____ (Contact)				
Address _____ Phone _____				Salary Verified? Y N
From ____/____/____ To ____/____/____ Gross Monthly Income _____				
APPROVED: Y N				
SPOUSE'S EMPLOYER:				Employed? Y N
_____ (Name) _____ (Contact)				
Address _____ Phone _____				Salary Verified? Y N
From ____/____/____ To ____/____/____ Gross Monthly Income _____				
APPROVED: Y N				
PREVIOUS EMPLOYER:				Employed? Y N
_____ (Name) _____ (Contact)				
Address _____ Phone _____				Salary Verified? Y N
From ____/____/____ To ____/____/____ Gross Monthly Income _____				
APPROVED: Y N				

BANKING INFORMATION

Checking Account # _____ Bank _____ Branch _____
Savings Account # _____ Bank _____ Branch _____
Credit Cards:
Account # _____ Type _____ Balance _____
Account # _____ Type _____ Balance _____

VEHICLES

Year _____ Make _____ Model _____ Color _____ License Plate #/State _____ / _____
Year _____ Make _____ Model _____ Color _____ License Plate #/State _____ / _____

EMERGENCY CONTACT

Name _____ Relationship _____
Address _____ Phone _____
(Street) (City) (State) (ZIP)

GENERAL INFORMATION

Property you are interested in? _____ Move in Date requested? _____
Have you ever applied and been denied by any Acacia Partners' properties? _____ If yes, explain: _____
Have you ever been evicted? _____ Have you ever paid your rent late? _____ If yes, explain: _____
Have you ever been convicted of a crime? _____ If yes, explain: _____
Have you ever filed for bankruptcy? _____ Has it been discharged? _____ Please explain: _____
Do you or any of your occupants currently use or sell illegal drugs? _____
Do you have any water-filled furniture? _____ Do you have or plan to have any pets? _____ House broken? _____
Why are you leaving your current residence? _____
How did you hear about this property? If internet, be specific: _____ Have you ever lived here before? _____
Why did you decide to rent here? _____ If accepted, how long do you plan to live here? _____
Do you know any of our current residents? _____ If, yes, who? _____
Please use the space below to explain any of the above answers:

BASIC REQUIREMENTS OF QUALIFICATION

- ◆ Good to fair credit ◆ NO EVICTIONS ◆ Good to fair rental/residential history ◆ No bankruptcy unless discharged
- ◆ Combined monthly household income greater than or equal to 3 times the monthly rent
- ◆ A copy of your picture ID and Social Security card must be submitted with this application.

I/We the undersigned applicant(s) authorize Landlord or his/her/their agent, Acacia Partners, to order and review my/our credit and criminal history and investigate the accuracy of the information contained in the application. I/We further authorize all banks, employers, creditors, credit card companies, references, and any an all other persons to provide to landlord any and all information concerning my/our credit. I understand that management and management's employees are agents and representatives of the property owners. Applicant certifies that all of the above statements are true and complete. Applicant acknowledges that false information contained herein constitutes grounds for denial of this application. Applicant acknowledges that management reserves the right to verify application information after move in, and will immediately terminate the lease if false or misleading information is contained in the application. This application is preliminary only, and does not obligate the owner or owner's representatives to execute a lease or deliver possession of the proposed premises.

Applicant 1 _____ Date _____ Applicant 2 _____ Date _____

Lease Application Paid Y / N (\$45 per adult over 18 yrs.)

Leasing Agent _____ Date _____ Lease processed by _____ Date _____

Manager _____ Date _____

REFERENCES

3 minimum please

REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	
REFERENCE (Last Name, First Name, Middle Initial)			Relationship		Known Yrs Mos	
Address		City, State		Zip Code	E-Mail Address	
Daytime Phone	Home Phone		Cell Phone		Pager	



RESIDENT VERIFICATION FORM & RELEASE

Applicant _____ Date _____ Co- Applicant _____ Date _____
I/ we, the undersigned, do hereby authorize any current or prior landlord/apartment community, to completely and accurately answer the following questions. I hereby release them from any liability for the answers provided.

Applicant Signature _____ Date _____ Co- Applicant Signature _____ Date _____

OFFICE USE ONLY

Sent To: _____ Sent By: _____ Fax Number: _____

Please complete and fax back to: (520) &- , - * * \$ \$

The above named applicant(s) states s/he/they rented from the following address:

ADDRESS _____ APT# _____ CITY _____ STATE _____ ZIP CODE _____
From: _____ To: _____
(Move In Date) (Move out Date)

1. Are the dates of residency correct: YES NO
If no, correct date(s) are: From: _____ To: _____
(Move In Date) (Move out Date)
2. Was the full term of the lease fulfilled? YES NO
If no, please explain: _____
3. Did resident provide adequate notice to vacate? YES NO
If no, please explain: _____
4. Rental rate during residency: \$ _____ /month
5. Number of Times resident paid late: _____
6. Number of returned checks: _____
7. Were there any lease or community policy violations during the course of the residency? YES NO
If yes, how many violation and what was the nature of these violations?

8. Was the applicant(s) the subject of forcible detainer action? YES NO
If yes, what were the grounds? _____
9. Was the deposit or any portion thereof withheld or changes due at move-out due to damage of the unit?
 YES NO
10. Were there any charges at move-out due to property damage? YES NO
11. Would you re-rent to this resident? YES NO

Comments: _____

Information obtained from/by: _____
Name Title Date

Please complete and fax back to: (520) &- , - * * \$ \$

7423 E Tanque Verde, Tucson, AZ 85715
520-298-6600 Fax 520-&- , - * * \$ \$
www.Acacia-Partners.com