

CAMBRIDGE HALL APARTMENTS

LEASEHOLDER APPLICATION

NAMES TO APPEAR ON LEASE

1. _____
Name (include full middle name) Date of Birth SS#
Phone _____ Cell _____ Email _____

NAMES OF ALL OCCUPANTS & RELATIONSHIPS TO LEASEHOLDER

1. _____
Name Date of Birth Relationship
2. _____
Name Date of Birth Relationship
3. _____
Name Date of Birth Relationship

RESIDENCE HISTORY

Current Address _____ City _____ State _____ Zip _____
Monthly Rent/Mortgage Payment \$ _____ Dates of Residency (from/to) _____
Owner/Manager's Name (For Rental Reference only) _____ Phone: _____

(If current is less than 1 year)

Previous Address _____ City _____ Zip _____
Monthly Rent/Mortgage Payment \$ _____ Dates of Residency (from/to) _____
Owner/Manager's Name (For Rental Reference only) _____ Phone: _____

EMPLOYMENT HISTORY (Last 2 paystubs or Tax Returns required)

Current Employer _____ Position _____
Dates of Employment: _____ Name of Supervisor _____
Direct Phone for Supervisor _____ Monthly Salary \$ _____

(If current is less than 1 year)

Previous Employer _____ Position _____
Dates of Employment: _____ Name of Supervisor _____
Direct Phone for Supervisor _____ Monthly Salary \$ _____

ADDITIONAL INCOME

Amount \$ _____ Source _____

Please complete back side

EMERGENCY CONTACT

Name _____ Phone# _____

Address _____ Relationship _____

MOTOR VEHICLE (residents only)

1. Make/Model: _____ Color: _____ Year: _____ Plate#: _____

CONSUMER AUTHORIZATION TO OBTAIN CONSUMER REPORT

I hereby authorize CoreLogic SafeRent to obtain a consumer report on behalf of Cambridge Hall Apartments 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 of arrest, rental history, employment/salary details, vehicle records, licensing records, and/or any other necessary information.

I hereby expressly release CoreLogic SafeRent, 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.

1. If the agents for Cambridge Hall Apts. deem any information or statement in this Application to be false or misleading, the lease may be canceled without notice
2. Occupant hereby deposits in two **separate** checks the following:
 \$50.00 as a non-refundable application fee.
 \$500.00 to be applied to the first month's rent. If the applicant cancels
 The application or fails to execute a lease, the \$500.00 will be forfeited.
3. Applicant authorizes Cambridge Hall Apartments to use a consumer-reporting agency, credit bureau or investigative agency to investigate this information and statements in this application.

Signature of Applicant _____

Date _____

FOR OFFICE USE ONLY:

Unit: _____

Term: _____

Size: _____

Lease Start Date: _____

Rent: _____

Approved: _____

MIA Date: _____