



**JOHN REIDER PROPERTIES II, LTD.
RENTAL APPLICATION**

Each co-resident and each occupant, 18 or over, must submit a separate application

<input checked="" type="checkbox"/> Full Name	Social Security Number
Driver's License Number & State	Date of Birth
Address listed on Driver's License	City, State Zip
Email Address	Phone Number:
Current Address	City, State, Zip
<input checked="" type="checkbox"/> Current Employer	Employers Address
Monthly Income	If military, Rank & ETS Date
Supervisors Name	Phone Number
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single	Will you have an animal? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what kind?
<input checked="" type="checkbox"/> Spouses Full Name	Social Security Number
Driver's License Number & State	Date of Birth
Email Address	Phone Number
<input checked="" type="checkbox"/> Current Employer	Employers Address
Monthly Income	If Military, Rank & ETS Date
Supervisors Name	Phone Number
<input checked="" type="checkbox"/> Name of Current Landlord	Phone #
Why are you leaving your current residence	Have you ever been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you given notice to vacate? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, explain:	Have you been sued for damages to a rental property? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> Other occupants under the age of 18, please list	Name & Relationship
Name & Relationship	Name & Relationship
<input checked="" type="checkbox"/> Emergency Contact #1 Name, address, phone number, email address	
<input checked="" type="checkbox"/> Emergency Contact #2 Name, address, phone number, email address	
If either party is military, are you scheduled to deploy or PCS?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain:
<input checked="" type="checkbox"/> CRIMINAL HISTORY - Have you or your spouse ever been charged, detained or arrested for a crime? If yes, explain:	
<input checked="" type="checkbox"/> IN CASE OF EMERGENCY In case of emergency, if you die or are seriously ill, missing, in jail or penitentiary, according to an affidavit from the Emergency Contacts above, your spouse, sibling, parent or child - we may, at our discretion, allow such persons into your dwelling to remove the contents as well as the property in your mail box, common areas and storerooms. If you are seriously ill, or injured, you authorize us to call EMS or send for an ambulance at your expense. We're not obligated to do so.	AUTHORIZATION By signing below, you authorize John Reider Properties II, Ltd. to verify, by all available means, the above, including reports from consumer reporting agencies before, during and after tenancy on matters relating to your lease and income history. Work history information may be used only for this application. Authority to obtain work history information expires 365 days from the date of this application. By Signing this application, you certify that you have reviewed and accept John Reider Properties II, Ltd. Qualifying Guidelines.
Applicant's Signature	Spouses Signature
Date of Signing	Date of Signing