

## Rental Application

Apartment: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Move-In Date: \_\_\_\_\_ Application: \_\_\_\_\_ Rent: \_\_\_\_\_ Deposit: \_\_\_\_\_

**Applicant:** \_\_\_\_\_

Telephone: \_\_\_\_\_

SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

**Co-Applicant:** \_\_\_\_\_

Telephone: \_\_\_\_\_

SSN: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

How many people will live in the apartment? \_\_\_\_\_

What pets (and ages), including fish, will be with you? \_\_\_\_\_

Are you a smoker? Yes  No

How did you hear about us? \_\_\_\_\_

May we share your name and number with other apartment residents? Yes  No

Emergency Contact:

Name

Relationship

Phone

\_\_\_\_\_  
\_\_\_\_\_

### Credit/Rental History Authorization

I/we hereby authorize the release of the above information to the credit company of choice to assist in the verification of credit, criminal background, residential, or employment history. This information is to be used for my/our credit report and for my/our application for occupancy.

I/we hereby waive any privileges that I/we may have with respect to said information in reference to its release to the aforesaid said party.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Co-Applicant's Signature

\_\_\_\_\_  
Applicant's printed legal signature

\_\_\_\_\_  
Co-Applicant's printed legal signature

**DOWNTOWN DWELLINGS  
AUTHORIZATION AGREEMENT FOR PREAUTHORIZED DEBITS/CREDITS (ACH DEBITS)**

I (we) hereby authorize Brown Judy Management, LLC, the banking branch of Downtown Dwellings, to initiate debit entries and, if necessary, adjument entries to my (our) account at the banking institution listed below.

I (we) understand that should the regularly scheduled debit date fall on a weekend or a federal holiday, the debit shall occur on the followin banking date.

**Fixed Amount and Date Account Authorization**

<b>Type of Account:</b>	CHECKING: <input type="checkbox"/>	SAVINGS: <input type="checkbox"/>																
<b>Depository Financial Institution:</b>	_____																	
<b>Account Name:</b>	_____																	
<b>Routing Number:</b>	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td><td style="width: 12.5%;"></td> </tr> </table>																	
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<b><u>Use of Form</u></b>	
One-time Application Fee:	<input type="checkbox"/>
\$27 - one person	<input type="checkbox"/>
\$40 - two people	<input type="checkbox"/>
**One-time Deposit:	<input type="checkbox"/>
\$300 - one bedroom	<input type="checkbox"/>
\$400 - two bedroom	<input type="checkbox"/>
**Monthly Rent:	<input type="checkbox"/> \$ _____
One-time Partial Rent:	<input type="checkbox"/> \$ _____
** If this form is used for multiple purposes, the application must be approved before any other action is taken.	

This authority is to remain in full force and effect until Brown Judy Management has received written notification from me (or either of us) of its termination in such a time and manner as to afford the Company and the Depository Institution a reasonable opportunity to act on it.

<b>Printed Name:</b>		
<b>Signature:</b>		
<b>Address:</b>	<b>City:</b>	<b>State:</b>
<b>Date:</b>		