



DTN Management Co Rental Application

Each Co-Applicant must complete a separate Rental Application. Date: _____

Community _____ Apartment #: _____

Please tell us about yourself

Full Name: _____ Phone: () _____

Social Security #: _____ Driver's License #: _____ Email: _____

Marital Status: _____ Date of Birth: _____ Gender: _____

Your Vehicle Make/Model: _____ Year ____ Color _____ Auto License #: _____

2nd Vehicle Make/Model: _____ Year ____ Color _____ Auto License #: _____

Name of Co-Applicant(s): _____

Other Occupants (minor children/non-lease holders):

Names: _____ Date of Birth: _____ Relationship: _____

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Person to Notify in Case of Emergency: _____ Email: _____

Address of Emergency Contact: _____

Relationship: _____ Phone: () _____

Do you have any pets? ___ If yes, how many _____ Type _____ Weight _____ Breed _____ Age _____

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Please give your resident history for the past 3 years (beginning with your current address)

Have you ever lived in a DTN Community? _____ If yes, where? _____ Month/Year Moved In ____ / ____

Current Address: _____ Month/Year Moved In ____ / ____

City: _____ State: _____ Zip Code: _____ Month/Year Moved Out ____ / ____

Reason for leaving: _____ Monthly rental rate \$ _____

Owner or Landlord: _____ Phone: () _____

Permanent Address (if student): _____

Previous Address: _____ Month/Year Moved In ____ / ____

City: _____ State: _____ Zip Code: _____ Month/Year Moved Out ____ / ____

Reason for leaving: _____ Monthly rental rate \$ _____

Owner or Landlord: _____ Phone: () _____

Please give your employment information for the past 3 years (beginning with your current employer)

Employment Status: _____ Full Time _____ Part Time _____ Retired _____ Unemployed _____ Student

Current Employer: _____

Address: _____ Phone: () _____

City: _____ State: _____ Zip Code: _____ Occupation: _____

Dates Employed: _____ Supervisor: _____

Monthly Gross Salary: \$ _____ Supervisor Phone Number: () _____

School _____ ID# _____ Present Status: F S J S G Doc. Major: _____

Previous Employment History:

Employer: _____ Phone: () _____

Address: _____ Occupation: _____

City: _____ State: _____ Zip Code: _____ Supervisor: _____

Dates Employed: _____ Supervisor Phone Number: () _____

Monthly Gross Salary: \$ _____

If there are other sources of income that you would like us to consider, please list income, source, and person (Bank, Employer, etc.) who may be contacted for confirmation. You **DO NOT** have to reveal alimony, child support unless you want us to consider it in this application.

Amount \$ _____ Source/Verification Contact _____ Phone () _____

Have you ever:

Filed for bankruptcy within the last 3 years? Yes No
Been evicted or not paid your rent? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please explain providing location, date and nature of each offense:

Have you ever been convicted of criminal sexual conduct such that you are required to register/notify local law enforcement agency of your address? Yes No

If yes, please explain providing location, date and nature of each offense:

How did you hear about this apartment community?

What attracted you to this apartment community?

Why are you leaving your present address?

An administrative fee is required before an application will be considered. Contact should be made with the rental office within three (3) business days to determine if the application has been approved. Failure to contact the office to determine whether the application was approved or denied, and to set up a satisfactory lease signing date within that time period, may result in the forfeiture of the fee paid with this application. If the applicant is approved for residency and then decides not to lease the apartment, no refund will be given. The office reserves the right to deny any application.

I certify that the preceding information furnished is accurate and complete and agree that inaccuracies and/or omissions may be the basis for denial of my application or any residency created in reliance on this application. Misrepresentation on the application will result in forfeiture of all fees paid. I authorize DTN Management Co. to verify any of the information contained in this application and/or make a thorough credit evaluation.

Applicant's Signature:

Receipt of fee of \$ is acknowledged by:

Check or Money Order #

No residency is created by this application, only through a written lease agreement signed by both the resident and the landlord. Applicant further acknowledges that DTN Management Co. is the agent for the property owner.

Applicant: DO NOT WRITE BELOW, FOR OFFICE USE ONLY

Identification Confirmed by: Prospect's Driver's License #

CURRENT LANDLORD REFERENCE:

Date: Person Contacted: Verified all information provided on Application:

Is applicant currently on a lease? Number of late payments or NSF checks (within last 3 years)

Any complaints re: this applicant, their guests, pets, etc.

Would you rent to them again?

PREVIOUS LANDLORD REFERENCE:

Date: Person Contacted: Verified all information provided on application:

Is applicant currently on a lease? Number of late payments or NSF checks (within last 3 years)

Any complaints re: this applicant, their guests, pets, etc.

Would you rent to them again?

CURRENT EMPLOYMENT REFERENCE:

Date: Person Contacted: Verified all information provided on application:

PREVIOUS EMPLOYMENT REFERENCE:

Date: Person Contacted: Verified all information provided on application:

Terms of Acceptance

Application Approved / Denied (circle one) Approved by: Date: Method of notification: Person notifying applicant:

Approved: Move In Date: Lease Signing Date: Rented by: Guarantor: Security Deposit: \$ Concession/Special: \$

Denied: Reason for denial: (circle one) Income, credit, resident history or criminal