City Heights Properties Applicant Information page

Owner's Signature:

APPLICANT, PLEASE PRINT. USE ONLY BLACK OR DARK BLUE INK.

| | Expected Move in date: | | Rent Amt: \$ | |
|------------------------------------|--|---|--|--|
| | SS# | DOI | 3 mm/dd/yyyy | |
| parated Divorced Widowed _ | How long? D | river License #: | State | |
| | | | | |
| | Applicant Em | ail: | | |
| Residential | Information | | | |
| (C44) | (City State & Zin |] | Date moved in: | |
| | (City, State & Zip | Code) | | |
| | | | | |
| Have you or you | ur spouse ever beer | n evicted or subject to | o landlord action: | |
| Applicants 3 | Employment | | | |
| | | | | |
| Position: | | Month | ly Salary \$ | |
| | | Phone# | ! : | |
| Position: | | Month | ly Salary \$ | |
| ls who will reside at this prop | erty (and no others |): | | |
| | | | | |
| | | | Birth: | |
| TC 1 . 1 . 1 | | | Birth: | |
| If so, what kind: | | How many: | Weight? Lbs | |
| including RVs, to be kept at the d | lwelling unit. Include | e make, model, year, and | d license plate # for each. | |
| Make: | Ye | ar: License | #: | |
| Make: | Ye | ar: License | #: | |
| | Residential (Street) Reason for moving: Holder: Have you or you Applicants I Position: Position: Is who will reside at this propide at this property? If so, what kind: | Residential Information (Street) (City, State & Zip Reason for moving: | Residential Information (Street) (City, State & Zip Code) Reason for moving: Phone #: Holder: Phone #: Applicants Employment Position: Phone # Position: Month Is who will reside at this property (and no others): ide at this property? If so, how many? Date of | |

Date signed: