



Denizen Management Membership Application

1. Applicant Name: _____ 1A. Spouse Name: _____
Home Phone: _____ Home Phone: _____
Cell Phone: _____ Cell Phone: _____
DL Number: _____ DL Number: _____
Date of Birth: _____ Date of Birth: _____
Soc. Sec No. : _____ Soc. Sec No. : _____
Email Address: _____ Email Address: _____

2. Present Address: _____
Circle One: Lease Own Other: _____ Length at current Address (in months) _____
List name and address of landlord or Mortgage Company on the line below: Monthly payment _____

3. Previous Address if above is less than two years:

4. Applicant's occupation: _____ Employed by: _____
Address: _____ Phone: _____
Work email: _____ Start Date: _____ Gross Monthly Income _____
Immediate Sup: _____ Other Income: _____ Source _____

5. Spouse's occupation: _____ Employed by: _____
Address: _____ Phone: _____
Work email: _____ Start Date: _____ Gross Monthly Income _____
Immediate Sup: _____ Other Income: _____ Source _____

Other Occupants of the apartment:

Name Relationship Date of Birth

7. Emergency Contact: _____ Relationship: _____

Phone #: _____ Address: _____

8. Number of autos owned or used by all occupants: _____

Make Model Color Year Plate# State

9. Pets: # Dogs: _____ Weight: _____ Breed: _____ # Cats: _____

10. Have you or anyone living in your unit, ever been convicted of a felony: yes no Initial: _____

If yes, what was the offense and when? _____

11. Do you have renters insurance? Yes or No If yes, name of carrier _____

Policy number: _____ Initials: _____

12. Have you ever had problems with pest contaminations, such as bed bugs? Yes or No (circle one)

If yes, please identify the year, describe the problem and describe the corrective actions taken, if any:

13. How did you hear about us? _____

I/we understand and agree that if this offer to lease is accepted, I/we will execute a lease with Denizen Management and the first rental payment will be due upon the first day of occupancy and will cover the Period from the first day of the term through the remainder of that month. Thereafter, all rental payments Will be due and payable in advance on the first day of each month. I/we hereby consent to allow Denizen Management through its designated agent and its employees, to obtain and verify my/our credit, criminal and related information for the purpose of determining whether or not to lease to me/us an apartment.

I/we hereby agree that Denizen Management may retain the entire deposit of \$_____ tendered by me/us with this lease application should Denizen Management approve the lease application, and I/we for any reason fail, refuse or decide not to execute a lease agreement with Denizen Management.

Application fee is non-refundable

Applicant Signature X _____ Date: _____

Applicant Signature X _____ Date: _____