

Carol Greener Properties

Phone 916-838-1227

Fax 916-915-1853

Rental Application

Please include a \$30.00 application fee

Applicant Information

Name:		Date of birth:	
Phone:	SSN:	Have you ever been evicted?	
Current address:		City, State, Zip:	
Landlord:		Landlord Phone:	
Own Rent (Please circle)	Monthly payment or rent:		How long?
Previous address:		City, State, Zip	
Landlord:		Landlord Phone:	
Owned Rented (Please circle)	Monthly payment or rent:		How long?
Have you ever filed for Bankruptcy?		If so when	Pets?
Children residing with you:			

Employment Information

Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Monthly income:	

Emergency Contact

Name of a person not residing with you:			
Address:			
City:	State:	ZIP Code:	Phone:
Relationship:			

Co-applicant Information, if Married

Name:			
Date of birth:	SSN:	Phone:	
Current address:		City, State, Zip:	
Landlord:		Landlord Phone:	
Own Rent (Please circle)	Monthly payment or rent:		How long?
Previous address:		City, State, Zip:	
Landlord:		Landlord Phone:	
Owned Rented (Please circle)	Monthly payment or rent:		How long?
Have you ever filed Bankruptcy?		If so when?	Have you ever been evicted?

Co-applicant Employment Information

Current employer:			
Employer address:			How long?
Phone:	E-mail:	Fax:	
City:	State:	ZIP Code:	
Position:	Hourly Salary (Please circle)	Monthly income:	

References

Name:	Address:	Phone:

I authorize the verification of the information provided on this form as to my credit and employment. I declare that the foregoing information is true and correct.

Signature of applicant:	Date:
Signature of co-applicant:	Date:

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