

ROOM RENTAL APPLICATION

DATE NEEDED: _____

LENGTH OF STAY: _____

NAME: _____

PHONE NUMBER: _____

EMAIL: _____

D.O.B: _____

RENTAL HISTORY

PRESENT ADDRESS: _____

LANDLORD NAME: _____ PHONE: _____

DETAILS OF EMPLOYMENT

EMPLOYER: _____ PHONE: _____

VEHICLE INFORMATION

MAKE/MODEL: _____ PLATE: _____

EMERGENCY CONTACT

NAME: _____ PHONE: _____

CRIMINAL BACKGROUND CHECK AUTHORIZATION

FELONY CONVICTIONS: YES / NO _____

SEX OFFENDER REGISTRATION: YES / NO _____

APPLICANG SIGNATURE: _____ DATE: _____