

## LEASE APPLICATION AND DEPOSIT RECEIPT

**NOTE:** Co-applicants except for spouse must complete a separate application form. **PLEASE PRINT**

1. NAME \_\_\_\_\_ Married \_\_\_\_\_ Single \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_

2. DATE OF BIRTH: \_\_\_\_\_ PHONE# \_\_\_\_\_ SOC.SEC.#: \_\_\_\_\_

3. LIST ALL OTHER PERSONS THAT WILL BE RESIDING IN THE APARTMENT:

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ Relationship: \_\_\_\_\_

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Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ Relationship: \_\_\_\_\_

4. Have you, or **ANYONE** (regardless of age) who will be residing with you:

- a. **Ever been arrested, cited, prosecuted, plead guilty to, or been convicted of a crime?** ☐ Yes ☐ No  
b. **Ever** been placed on **probation, parole**, or effected by the Megan Laws? ☐ Yes ☐ No  
c. **Ever** been or currently are a member of **gang**? ☐ Yes ☐ No  
d. **Ever** had a or currently have a warrant for your/their arrest? ☐ Yes ☐ No  
e. **Ever** been or currently are involved in **ANY criminal activity**? ☐ Yes ☐ No  
f. **Ever** applied for residency or lived at a community managed by **Centurion Management Company**? ☐ Yes ☐ No  
g. **Ever** been evicted or had a forcible detainer filed against you? ☐ Yes ☐ No  
h. **Ever** moved to avoid eviction or because of problems with other tenants or a landlord? ☐ Yes ☐ No

Explain **ALL** "Yes" answers IN DETAIL \_\_\_\_\_

5. Will you have a waterbed? ☐ Yes ☐ No Do you have any musical instruments? ☐ Yes ☐ No Will you have service animals ☐ Yes ☐ No  
Service animals are permitted with proper documentation. See Landlord for details.

6. Will a pet of any kind live in the Apartment? \_\_\_\_\_ If yes, please describe: Type of Pet \_\_\_\_\_  
Weight \_\_\_\_\_ lbs. Spayed/Neutered ☐ Yes ☐ No License # \_\_\_\_\_ Expires: \_\_\_\_\_

7. Your DRIVER LICENSE# \_\_\_\_\_ STATE \_\_\_\_\_ EXP. DATE \_\_\_\_\_  
Spouse's DRIVER LICENSE# \_\_\_\_\_ STATE \_\_\_\_\_ EXP. DATE \_\_\_\_\_

8. VEHICLES you would like to park on the property:

AUTO Make \_\_\_\_\_ Yr. \_\_\_\_\_ Color \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_

AUTO Make \_\_\_\_\_ Yr. \_\_\_\_\_ Color \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_

MOTORCYCLE Make \_\_\_\_\_ Yr. \_\_\_\_\_ Color \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_

Description of any other vehicle (boats, trucks, trailers, recreational vehicles, etc.) you would like to keep on the property. Prior written permission, separate from this application must be obtained from management.

Make \_\_\_\_\_ Yr. \_\_\_\_\_ Color \_\_\_\_\_ Tag# \_\_\_\_\_ State \_\_\_\_\_

9. CURRENT EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Position \_\_\_\_\_ Hire Date \_\_\_\_\_ Supervisor \_\_\_\_\_

Gross Income \$ \_\_\_\_\_ (circle one) Hourly Weekly Bi-Weekly Monthly Yearly

10. PREVIOUS EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Position \_\_\_\_\_ Hire Date \_\_\_\_\_ Last Date Worked \_\_\_\_\_ Supervisor \_\_\_\_\_

11. SPOUSE'S EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Position \_\_\_\_\_ Hire Date \_\_\_\_\_ Supervisor \_\_\_\_\_

Gross Income \$ \_\_\_\_\_ (circle one) Hourly Weekly Bi-Weekly Monthly Yearly

12. PREVIOUS EMPLOYER \_\_\_\_\_ ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Position \_\_\_\_\_ Hire Date \_\_\_\_\_ Last Date Worked \_\_\_\_\_ Supervisor \_\_\_\_\_

13. OTHER SOURCES OF INCOME: TYPE OF INCOME \_\_\_\_\_ ANNUAL AMOUNT \_\_\_\_\_ CONTACT ADDRESS/PHONE \_\_\_\_\_

a) \_\_\_\_\_  
b) \_\_\_\_\_

14. RESIDENCE HISTORY:

Current Address \_\_\_\_\_ Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Monthly Payment: \$ \_\_\_\_\_ Length of Occupancy \_\_\_\_\_ Lease Expires \_\_\_\_\_  
Community Name, Landlord or Mortgage Holder \_\_\_\_\_ Phone # \_\_\_\_\_  
Reason for Moving? \_\_\_\_\_  
Previous Address \_\_\_\_\_ Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Community Name, Landlord or Mortgage Holder \_\_\_\_\_ Phone # \_\_\_\_\_  
Move-In Date \_\_\_\_\_ Move-Out Date \_\_\_\_\_

15. Have you ever been notified by a lender that you were delinquent on a mortgage payment or given written notification by management that you were late with rental payment? ☐ Yes ☐ No If yes, please explain: \_\_\_\_\_

16. Your Bank(s): NAME \_\_\_\_\_ ACCT# \_\_\_\_\_ BRANCH LOCATION/ADDRESS \_\_\_\_\_  
CHECKING \_\_\_\_\_  
SAVINGS \_\_\_\_\_

17. CREDIT REFERENCES (Bank Cards, Credit Cards, Charge Accts, Auto Loans)  
TYPE \_\_\_\_\_ HOST BANK/STORE/COMPANY \_\_\_\_\_ CARD/ACCT # \_\_\_\_\_  
a) \_\_\_\_\_  
b) \_\_\_\_\_

18. Person(s) to notify and person you want responsible for your personal property in case of emergency (other than co-resident).

FOR APPLICANT		FOR SPOUSE	
NAME _____		NAME _____	
ADDRESS _____		ADDRESS _____	
CITY/STATE _____		CITY/STATE _____	
PHONE # _____		PHONE # _____	
RELATIONSHIP _____		RELATIONSHIP _____	

**DEPOSIT TO HOLD AGREEMENT**

In consideration of management reserving the apartment for me, I agree to pay a deposit of \$ \_\_\_\_\_. This deposit is refundable if my Application is approved, as it is credited to the required security deposit. I may cancel this agreement and be refunded my deposit by notifying you of my decision to cancel by 5 p.m. on \_\_\_\_\_ 20 \_\_\_\_\_. Cancellation after this time will result in forfeiture of my deposit. I must pay rent on or before my "MOVE-IN DATE" or my deposit will be forfeited and the apartment re-rented. There will be a \$20 fee for any returned checks.

**LEASE AGREEMENT INFORMATION**

Apt. #	Type	Agreement Length	Parking Space	DATE	MOVE-IN	Traffic Source
BASIC RENT	\$ _____		SECURITY DEPOSIT		\$ _____	
PET RENT*	\$ _____		(total amount before crediting			
PARKING RENT	\$ _____		deposit to hold)			
OTHER RENT	\$ _____		NON-REFUNDABLE REDECORATING			
SUBTOTAL	\$ _____		CHARGE		\$ _____	
Tax (varies by city)	\$ _____		NON-REFUNDABLE PET			
TOTAL	\$ _____		SANITIZE CHARGE		\$ _____	
*Does Not Apply to Assistive Animals			MOVE-IN SPECIAL		\$ _____	

**AMOUNT DUE AT MOVE-IN (in the form of a money order) \$ \_\_\_\_\_**

Initial \_\_\_\_\_

\_\_\_\_\_ Applicant represents that all of the above statements are true and complete, and authorizes management to verify.  
\_\_\_\_\_ Falsification of information on application results in forfeiture of Deposit to Hold and constitutes grounds for rejection of this application or eviction from the premises. Management reserves the right to verify application information after move-in and may convert the proposed rental agreement to a month-to-month term if false or misleading information is contained herein.  
\_\_\_\_\_ I authorize all persons/or firms named and unnamed in this application to freely provide any and all requested information concerning me and hereby waive all right of action for any consequence resulting from such information and/or the providing thereof.  
\_\_\_\_\_ Applicant agrees to the terms of the "Deposit to Hold Agreement."  
\_\_\_\_\_ Applicant must bring in utility receipt verifying that utilities are in his/her name on the move-in date.  
\_\_\_\_\_ Applicant understands that the amount due at move-in is just an estimate, and may change depending upon the information obtained at the time the application is verified.  
\_\_\_\_\_ Applicant realizes that the application fee of \$ \_\_\_\_\_ is a non-refundable processing fee even if the application is not approved.

APPLICANTS SIGNATURE _____	AGENT OF MANAGEMENT _____
DATE _____	DATE _____
SPOUSE'S SIGNATURE _____	
DATE _____	PROPERTY _____

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Applicant: Driver License Verified? ☐ Yes ☐ No  
Spouse: Driver License Verified? ☐ Yes ☐ No

**APPLICATION CHECK - OFFICE USE ONLY**

Social Security # Verified? ☐ Yes ☐ No  
Social Security # Verified? ☐ Yes ☐ No