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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| APPLICANT‘S INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Applicant’s Name | (First Name) | | | | | | | | (Middle Name) | | | | | | | | | | (Last Name) | | | | | | | | | | | | | | | | | |
|  | Date of Birth | |  | | | | | | | | Place of Birth | | |  | | | | | | | | | | | | | | | | | *Preferred Move in Date:* | | | | | |
| Applicant’s Email | **Note: Applicant must be 19 in the State of Nebraska*.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Social Security Number, or  Green Card/VISA  (Copy of SS Card or Alternative Document with SS# Required) | | | | |  | | | | | | | | Driver’s License Number  (*Copy of License Required. If no license, state issued photo ID.*) | | | | | | | | |  | | | | | | | | | | | | | State | |
| Please complete last three (3) years of residency. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Present  Address | Street | | | | | | | City | | | | | | State | | | | | | | Zip Code | | | | | | | | County | | | | | | | |
|  | Mobile Phone  ()- | | | | | | | | | Home Phone  ()- | | | | | | | | | | | | Rent/Mortgage  ***$      /month*** | | | | | | | | | | | | | | |
| Landlord/  Mortgagee | Name | | | | | | | | | | | | | | | | Phone No.  ()- | | | | | | | | | | Length of Residency  Start: | | | | | | | End: | | |
|  | Street | | | | | | | | | | | | | | | | | | | City | | | | | | State | | | | | | | | | | Zip Code |
| If at previous address less than two years, please complete the following previous address as well. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous  Address | Street | | | | | | | City | | | | | | State | | | | | | | Zip Code | | | | | | | | County | | | | | | | |
|  | Home Phone  ()- | | | | | | | | | Work Phone  ()- | | | | | | | | | | | | Rent/Mortgage  ***$      /month*** | | | | | | | | | | | | | | |
| Landlord/  Mortgagee | Name | | | | | | | | | | | | | | Phone Number  ()- | | | | | | | | Length of Residency  Start: | | | | | | | | | | End: | | | |
|  | Street | | | | | | | | | | | | City | | | | | | | | | | | | | State | | | | | | | | Zip Code | | |
| If at previous address less than two years, please complete the following previous address as well. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous  Address | Street | | | | | | | City | | | | | | State | | | | | | | Zip Code | | | | | | | | County | | | | | | | |
|  | Home Phone  ()- | | | | | | | | | Work Phone  ()- | | | | | | | | | | | | Rent/Mortgage  ***$      /month*** | | | | | | | | | | | | | | |
| Landlord/  Mortgagee | Name | | | | | | | | | | | | | | Phone No.  ()- | | | | | | | | Length of Residency  Start: | | | | | | | | | | End: | | | |
|  | Street | | | | | | | | | | | | City | | | | | | | | | | | | | State | | | | | | | | | | Zip Code |
| EMPLOYMENT INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Current Employer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | | |
| Street Address | | | | | | | | | | | | | | | | | | City | | | | | | | | | | State | | | | | Zip Code | | | |
| Period of Employment  From | | | | | | To |  | | | | | | | | | Phone Number  ()- | | | | | | | | | Monthly Income | | | | | | | Position | | | | |
| Other Sources of Income | | | | | | | | | | | | | | | | | | | | | | | | | Current Total Annual Income | | | | | | | | | | | |
| Previous Employer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Supervisor | | | | | | |
| Street Address | | | | | | | | | | | | | | | | | | City | | | | | | | | | | State | | | | | Zip Code | | | |
| Period of Employment  From | | | | | | To | | | | | | | | | | Phone Number  ()- | | | | | | | | | Monthly Income | | | | | | | Position | | | | |
| VEHICLE INFORMATION | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Color**(s) | | Year | | Make | | | | | | | | Model | | | | | | | | | | | | License Number | | | | | | | | | | | | State |
| **Color** | | Year | | Make | | | | | | | | Model | | | | | | | | | | | | License Number | | | | | | | | | | | | State |

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| PERSON(S) OTHER THAN APPLICANT TO OCCUPY APARTMENT ***(A Guarantor or Person(s) of legal adult age living in apartment are required to complete a Rental Application as well – minors and/or children are not required to complete Rental Application)*** | | | | | | | | | |
| Total number of person(s) to occupy Apartment | | | | | | | | | |
| Name |  | | | Relationship |  | | Age | |  |
| Name |  | | | Relationship |  | | Age | |  |
| Name |  | | | Relationship |  | | Age | |  |
| Name |  | | | Relationship |  | | Age | |  |
| Will anyone in your household require any special accommodations?  No  Yes | | | | | | |  | | |
| Has anyone in your household ever been evicted?  No  Yes | | | | | | |  | | |
| Has anyone in your household ever been convicted for any reason?  No  Yes If yes,  Felony  Misdemeanor | | | | | | | | | |
| Please Explain | | | | | | |  | | |
| Pet(s) Owned  Yes  No  \*Maximum Allowed Two\* | | Type | Breed | | Color | Age and Weight | | Name | |
| Type | Breed | | Color | Age and Weight | | Name | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| EMERGENCY CONTACTS ***(Other than Occupant living in Apartment; Only one is required)*** | | | | | |
| Name |  | | Phone Number  ()- | | |
| Street Address | | City | | State | Zip |
| Name |  | | Phone Number  ()- | | |
| Street Address | | City | | State | Zip |
|  | | | | | |
| Referred to Us By/ Website Used | | | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| I hereby make application to lease and agree that the rent is payable the first day of each month in advance. As consideration, I paid a deposit and application fee. Balance of deposit to be paid upon execution of the lease unless otherwise stated in the lease. I understand that, in addition, my application fee will be retained, to offset The Martinique Apartments cost, time, and effort in processing my application. Upon acceptance of this application, I agree to execute a lease. I recognize that, as a part of your procedure for processing my application, an investigative consumer report may be prepared whereby information is obtained regarding my credit history, employment history, criminal history, and housekeeping history. This inquiry includes information as to my character, reputation, personal characteristics, and mode of living. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation. **In the event this application is accepted, but I subsequently refuse to sign a lease and/or take possession of the premises, the deposit will be forfeited as damages.** I state that the information I have provided is true and correct to the best of my knowledge. | | | |
|  | | | |
| Applicant's Signature |  | Date |  |

*Rental Verification*

Hello,

The prospective tenant(s) have applied with us and I would like to obtain a rental verification as soon as possible. Please fill out the information below and fax back to (402) 397-3935 or email back to info@themartiniqueomaha.com. Thank you and have a great day!

Tenant(s) Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Tenant(s) Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tenant(s) Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| **TO BE COMPLETED BY LANDLORD** |
| Your Name & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Last Rent Amount Paid: \_\_\_\_\_\_\_\_\_\_\_\_\_  Occupied From: \_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_  Rent Paid on Time? \_\_\_\_\_\_\_\_ # Late: \_\_\_\_\_\_\_\_\_ # NSF: \_\_\_\_\_\_\_\_  Any 7/30- day notices served? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Has Resident Given Proper Notice? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Any Behavior/Maintenance Problems? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (i.e. Bed Bugs, Roach Infestations)  Would You Rent to Again? Yes/ No |

Thank you!

The Martinique Apartments

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To whom it may concern: This is an authorization to release the information concerning the employment of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Print Name)

Please provide the information below.

We appreciate your cooperation and prompt return of this information. Thank you and have a great day!

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Employee’s Signature) Employee’s Social Security Number)

|  |
| --- |
| **TO BE COMPLETED BY EMPLOYER** |
| Employer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Employment Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Pay Frequency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of Pay: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Usual Number of Weekly Hours: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Gross Wages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  (Employer’s Signature) (Title) (Date) |

Please Return To: Martinique Apartments

815 N. 94th Plaza

Omaha, NE 68114

Fax: (402) 397 – 3935

Email: info@themartiniqueomaha.com