

**RENTAL APPLICATION**

**DENNIS APARTMENTS LLC**    **419-335-2778**    **Fax 419-335-2793**    **DATE** \_\_\_\_\_

NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

DRIV. LIC. # & STATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE # \_\_\_\_\_

EMPLOYER \_\_\_\_\_

PHONE # \_\_\_\_\_

POSITION \_\_\_\_\_

HOW LONG \_\_\_\_\_

GROSS INCOME PER WEEK \_\_\_\_\_

NET INCOME \_\_\_\_\_

OTHER INCOME \_\_\_\_\_

PRESENT LANDLORD \_\_\_\_\_

PHONE # \_\_\_\_\_

ROOMMATE NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

DRIV. LIC. # & STATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

HOME PHONE # \_\_\_\_\_

EMPLOYER \_\_\_\_\_

PHONE # \_\_\_\_\_

POSITION \_\_\_\_\_

HOW LONG \_\_\_\_\_

GROSS INCOME PER WEEK \_\_\_\_\_

NET INCOME \_\_\_\_\_

OTHER INCOME \_\_\_\_\_

ARE BOTH APPLICANTS CURRENTLY SHARING RESIDENCE? \_\_\_\_\_ HOW LONG? \_\_\_\_\_

HOW MANY PEOPLE WILL BE LIVING IN THIS APARTMENT? \_\_\_\_\_

WERE YOU EVER EVICTED? \_\_\_\_\_ OR ASKED TO MOVE OUT? \_\_\_\_\_ HAVE YOU DECLARED

BANKRUPTCY? \_\_\_\_\_ HAVE YOU BROKEN A RENTAL AGREEMENT OR LEASE? \_\_\_\_\_

IF YES TO ANY QUESTION WHEN AND WHY? \_\_\_\_\_

DO YOU HAVE ANY PETS? \_\_\_\_\_

I authorize Tim and Suzanne Dennis to investigate my credit and employment history. If any information shown hereon is inaccurate or incomplete, it is understood that there will be an immediate cancellation of any lease entered into the grounds of fraud; eviction on grounds of trespass will ensue and the tenant will be removed from the premises forthwith any money paid in retained as actual damages.

APPLICANT \_\_\_\_\_

COAPPLICANT \_\_\_\_\_

If remitting by mail, please send to: Dennis Apartments LLC, 15370 County Road K, Wauseon, OH 43567

OFFICE USE: APPROVED \_\_\_\_\_ NOT APPROVED \_\_\_\_\_ IF NOT WHY \_\_\_\_\_

APPLICANT NOTIFIED BY LETTER TELEPHONE OTHER BY \_\_\_\_\_