

REALCHEK® STANDARD RENTAL APPLICATION

PLEASE USE ONE APPLICATION PER APPLICANT

YOU MUST COMPLETE BOTH SIDES IN FULL!

Name: _____
First Middle Last

Phone: () _____ home Email: _____

CURRENT ADDRESS:

Apartment name and apartment number address city state zip

Move In Date: _____ / _____ / _____ to Present
Move Out Date: _____ / _____ / _____
Rental I Owned
Relative Friend
name(s) on lease

Contact Name: _____ Phone: () _____
landlord or owner’s name or mortgagee

Landlord’s address city state zip

LIST PREVIOUS ADDRESS:

Apartment name and apartment number address city state zip

Move In Date: _____ / _____ / _____ Move Out Date: _____ / _____ / _____
Rental I Owned
Relative Friend
name(s) on lease

Contact Name: _____ Phone: () _____
landlord or owner’s name or mortgagee

Landlord’s address city state zip

LIST PREVIOUS ADDRESS:

Apartment name and apartment number address city state zip

Move In Date: _____ / _____ / _____ Move Out Date: _____ / _____ / _____
Rental I Owned
Relative Friend
name(s) on lease

Contact Name: _____ Phone: () _____
landlord or owner’s name or mortgagee

Landlord’s address city state zip

List Names of all other people who will be living with you, check if person will be signing Rental Agreement:

□ _____ □ _____
□ _____ □ _____

I authorize RealChek to obtain information on my rental/credit/criminal/employment/source of income history by contacting any references necessary to evaluate renting risks. I hereby release all references to give RealChek all requested information.

Applicant's Name: _____ Today's Date: ___/___/___
please sign legible name

*Social Security No: _____ *Driver's License No.: _____

*Other names: _____ *Birth date: ___/___/___ *Married since: ___/___/___
List all other names used by you including maiden names necessary to process reports and as a *cross-reference to insure proper identification mo. day yr. mo. day yr.

Employer/Source of income: _____ Phone: () _____

Address: _____ \$ _____ Wkly Mo.

Emergency Contact (not residing with you): _____ Relationship: _____

Address: _____ Phone: () _____

Bank/Financial References: _____ Account Type: _____

Address: _____ Phone: () _____

Have eviction proceedings ever been filed against you? No, Yes - Explain below

Are you required to register as a Registered Sex Offender? No, Yes - Explain below

Have you filed a Bankruptcy within the last two years? No, Yes - Explain below

Explanation:

Constine Communities, 1200 W. Main Street, Owosso, MI 48867
Phone: (989) 723-6913 Fax: (989) 729-7843
www.owossohomes.net

Please check the type of report(s) you want:

QuikChek Report Qualification Report (BOTH SIDES ARE NECESSARY) Credit Report Only

Eviction History Only for State(s) _____ OR Nationwide

Employment Verification Registered Sex Offender Search

Criminal Search for (must have full birthdate): State(s) _____ OR Nationwide

Access Code: 0087