

RENTAL APPLICATION

CLEAR CREEK APTS @ 481,453 & 435 West 365 So. Logan, Ut.

Email: majorpropccr@gmail.com

Before Filling our application - Please read the rules for Clear Creek Apartments.

1. **Absolutely no drinking or smoking** in the apartments or on the premises by residents or guests.
2. **No dogs, cats, or other animals** will be allowed in or on the premises whether permanent or temporary or belonging to tenant or guests.
3. All tenants will park in designated parking area. Guests may park in visitor area but not on the street in front of apartments.
4. No waterbeds without written approval.
5. Gasoline, fireworks or other combustible materials are not to be stored on premises. Nothing stored in furnace room.
6. Automobiles, motorcycles, bicycles must be parked only in designated areas, never on lawns or sidewalks.
There should be no major repairs or disassembling on the premises. No jacking up cars, no oil changing.
7. Violations of the law, or disorderly conduct which disturbs the peace, including loud music, noise, pranks, boisterous parties, rowdy behavior indoors or outdoors, or any activities creating a nuisance or endangering the health or safety of individuals or damaging property is strictly prohibited.
8. Tenant will be responsible for snow removal on sidewalks and front and back porches. Management will clear the snow on the streets.

I have read and understand the above rules/regulations. _____ (Initial)

APPLICANT PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	SOCIAL SECURITY#
DATE OF BIRTH	MARITAL STATUS	DRIVERS LICENSE #	STATE
CELL PHONE	HOME PHONE	EMAIL	

SPOUSE'S PERSONAL INFORMATION

FIRST NAME	MIDDLE	LAST	SOCIAL SECURITY#
DATE OF BIRTH	MARITAL STATUS	DRIVERS LICENSE #	STATE
CELL PHONE	HOME PHONE	EMAIL	

RESIDENTIAL HISTORY

PRESENT ADDRESS & APT.#	CITY/STATE/ZIP	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
LENGTH OF TIME	PRESENT LANDLORD	LANDLORD PHONE
REASON FOR LEAVING	AMOUNT OF RENT/MORTGAGE/MO.	Is present rent/mortgage up to date? Yes <input type="checkbox"/> No <input type="checkbox"/>
PREVIOUS HOME ADDRESS & APT#	CITY/STATE/ZIP	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
LENGTH OF TIME	PREVIOUS LANDLORD	LANDLORD PHONE
REASON FOR LEAVING	AMOUNT OF RENT/MORTGAGE/MO.	Was rent/mortgage up to date? Yes <input type="checkbox"/> No <input type="checkbox"/>
NEXT PREVIOUS HOME ADDRESS	CITY/STATE/ZIP	<input type="checkbox"/> RENT <input type="checkbox"/> OWN
LENGTH OF TIME	NEXT PREVIOUS LANDLORD	LANDLORD PHONE
REASON FOR LEAVING	AMOUNT OF RENT/MORTGAGE/MO.	Was rent/mortgage up to date? Yes <input type="checkbox"/> No <input type="checkbox"/>

RENTAL TERM

LENGTH OF TIME INTERESTED IN RENTING	DESIRED MOVE IN DATE	Willing to sign a one year lease? Yes <input type="checkbox"/> No <input type="checkbox"/>
IF UNWILLING TO SIGN A ONE YEAR LEASE, PLEASE EXPLAIN REASON:		

VEHICLE INFORMATION

YEAR	MAKE	MODEL	PLATE #	STATE
YEAR	MAKE	MODEL	PLATE #	STATE

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OTHER PROPOSED OCCUPANT(S) Add additional names on the back

NAME	RELATIONSHIP	AGE	OCCUPATION
NAME	RELATIONSHIP	AGE	OCCUPATION
NAME	RELATIONSHIP	AGE	OCCUPATION
NAME	RELATIONSHIP	AGE	OCCUPATION
NAME	RELATIONSHIP	AGE	OCCUPATION

APPLICANT EMPLOYMENT

CURRENT EMPLOYER	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>
CURRENT EMPLOYER (2nd job if applies)	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>
EXPLAIN ANY OTHER INCOME SOURCE:			

IF EMPLOYED LESS THAN TWO YEARS, INCLUDE 24 MONTHS EMPLOYMENT HISTORY BELOW

PREVIOUS EMPLOYER	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE AND END DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>
PREVIOUS EMPLOYER	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE AND END DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>

SPOUSE EMPLOYMENT

CURRENT EMPLOYER	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>
CURRENT EMPLOYER (2nd job if applies)	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>
EXPLAIN ANY OTHER INCOME SOURCE:			

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ADDRESS		PHONE NUMBER	HIRE DATE AND END DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>

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PREVIOUS EMPLOYER	TITLE	SUPERVISOR	HOURS/WEEK
ADDRESS		PHONE NUMBER	HIRE DATE AND END DATE
SALARY AMOUNT		WEEKLY <input type="checkbox"/> BIWEEKLY <input type="checkbox"/> MONTHLY <input type="checkbox"/> ANNUALLY <input type="checkbox"/>	PROOF OF INCOME YES <input type="checkbox"/> NO <input type="checkbox"/>

CREDIT CARD/FINANCIAL INFORMATION

CAR LOAN LIEN HOLDER	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CAR LOAN LIEN HOLDER	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CREDIT CARD COMPANY	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
CHILD SUPPORT	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
OTHER CREDIT OWED	BALANCED OWED	MONTHLY PAYMENT	CREDITOR'S PHONE #
BANK ACCOUNT NAME OF BANK	ACCOUNT #	BANK PHONE #	
BANK ACCOUNT NAME OF BANK	ACCOUNT #	BANK PHONE #	

PERSONAL REFERENCES

NAME	RELATION	PHONE NUMBER (S)	ADDRESS
NAME	RELATION	PHONE NUMBER (S)	ADDRESS
NAME	RELATION	PHONE NUMBER (S)	ADDRESS

EMERGENCY CONTACTS

NAME	RELATION	PHONE NUMBER (S)	ADDRESS
NAME	RELATION	PHONE NUMBER (S)	ADDRESS

APPLICANT QUESTIONNAIRE

Has applicant or any other applicant listed on this form ever been sued for bills?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever been bankrupt?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever been guilty of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever broken a Lease?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever been locked out of their apartment by the sheriff?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever been brought to court by another landlord?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Has applicant or any other applicant listed on this form ever moved owing rent or damaged apartment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Does the applicant or any other applicant listed on this form smoke?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is the total move-in amount available now (rent and deposit)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
How did you learn about this property?		

AUTHORIZATION

Applicant authorizes the landlord to contact past and present landlords, employers, creditors, credit bureaus, neighbors, and any other sources deemed necessary to investigate applicant. All information is true, accurate and complete to the best of applicant's knowledge. Landlord reserves the right to disqualify tenant if information is not as represented. ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OR SCANNED IMAGE OF THIS FORM AT ANY TIME.

APPLICANT SIGNATURE	DATE	SPOUSE SIGNATURE	DATE
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