

TERMS: APPLICANT CERTIFIES THAT ALL INFORMATION GIVEN TO EVALUATE THIS APPLICATION TO RENT / LEASE IS CORRECT AND COMPLETE. APPLICANT AUTHORIZES ALL INQUIRIES BY RENTAL OWNER, OWNER'S AGENT OR NATIONAL TENANT NETWORK DEEMED NECESSARY TO EVALUATE THIS APPLICATION. APPLICANT FURTHER UNDERSTANDS THAT ANY FALSE, INACCURATE, OR INCOMPLETE INFORMATION IS GROUNDS FOR IMMEDIATE REJECTION. APPLICANT SPECIFICALLY AUTHORIZES AND REQUESTS ALL PRESENT AND PREVIOUS EMPLOYERS, MORTGAGE HOLDERS, LANDLORDS, RENTAL AGENTS, CREDIT GRANTORS, BANKS, ACCOUNTANTS, STOCK BROKERS, AND ANY GOVERNMENT AGENCY TO RELEASE ANY REQUESTED INFORMATION IN THE EVALUATION OF THIS APPLICATION. THIS FORM IS PROVIDED BY NTN TO ASSIST ITS MEMBERS IN PROCESSING THEIR APPLICATIONS TO LEASE RENTAL PROPERTY. NTN SHALL NOT BE RESPONSIBLE FOR THE USE OR APPLICATION OF THIS FORM BY OTHERS OR ANY LEGAL ASPECT AS TO A LEASING / RENTAL AGREEMENT ENTERED INTO BY ANY PARTIES USING THIS FORM.

OFFICE USE ONLY:		
NTN MEMBER NAME: _____		ACCESS NUMBER: _____
TELEPHONE: _____	FAX: _____	
CONTACT: _____	DATE: _____	TIME: _____
REPORTS FOR: (Please Specify) <input type="checkbox"/> Applicant <input type="checkbox"/> Spouse		
REPORT TYPE(S): <input type="checkbox"/> CREDIT <input type="checkbox"/> EVICTION		
<input type="checkbox"/> DECISION POINT <input type="checkbox"/> PLUS <input type="checkbox"/> NATIONWIDE CRIMINAL <input type="checkbox"/> STATEWIDE CRIMINAL: STATE _____		
<input type="checkbox"/> FULL SERVICE (Credit, Eviction, Nationwide Criminal, Employer/Landlord Verifications)		

USE BLACK INK **PLEASE PRINT CLEARLY!** **VERIFY I.D. / SSN / ADDRESS INFO!**

Applicant: _____
LAST FIRST MIDDLE

SSN#: _____ / _____ / _____

Drivers Lic. # _____ State _____

DOB: _____ / _____ / _____

Cell Phone _____

E-mail _____

Spouse: _____
LAST FIRST MIDDLE

SSN#: _____ / _____ / _____

Drivers Lic. # _____ State _____

DOB: _____ / _____ / _____

Cell Phone _____

E-mail _____

Present Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____

City: _____ State: _____ Zip: _____ Date From _____ to _____

Current Landlord: _____ Phone: () _____

Previous Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____

City: _____ State: _____ Zip: _____ Date From _____ to _____

Previous Landlord _____ Phone: () _____

Previous Address: _____ Rent Amt: \$ _____ Reason for Leaving: _____

City: _____ State: _____ Zip: _____ Date From _____ to _____

Previous Landlord _____ Phone: () _____

Has an eviction ever been filed against you? Yes / No

Present Employer: _____ **Main Phone:** _____

Employer's Address: _____ Human Resource Contact: _____

Position: _____ Date From: _____ to _____

Military Rank: _____ Commanding Officer: _____

Gross Income: \$ _____ per week [] month [] yr [] Other Sources of Income: _____

Spouse's Employer: _____ **Main Phone:** _____

Employer's Address: _____ Human Resource Contact: _____

Position: _____ Date From: _____ to _____

Military Rank: _____ Commanding Officer: _____

Gross Income: \$ _____ per week [] month [] yr [] Other Sources of Income: _____

Emergency Contact & Phone: _____ Emergency Contact & Phone: _____

Personal Reference & Phone: _____ Personal Reference & Phone: _____

Others occupants (Full Name, Birth Date, Sex): _____

Pet Info: Dog / Cat (Circle One) (Breed, Age, Weight, M/F): _____

Auto Make	Yr	Tag #	Auto Make	Yr	Tag #	Other Vehicles? Yes or No
-----------	----	-------	-----------	----	-------	---------------------------

If I rent the property, I understand my rental history including lease violations and information I provide on this application may be reported to and maintained by National Tenant Network for up to 7 (seven) years after I vacate the premises.

Applicant Signature: _____ **Date:** _____

Spouse Signature: _____ **Date:** _____