



PROPERTY MANAGEMENT

IOWA CITY, IA
CORALVILLE, IA
CEDAR FALLS, IA

HOUSES
APARTMENTS
COMMERCIAL

Visit us on the web at:
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P.O. Box 3284
Iowa City, IA 52244-3284
(319) 594-1062

Rental Application

Address applied for? _____ Todays Date ____/____/____
Other roommates that will be on the lease: _____

Applicant Name _____ SS# ____ - ____ - ____
Birth Date ____/____/____ Phone Number _____ Email _____
Are you a student (Circle One - **Yes/ No**) Major _____ G.P.A. ____ Year ____

Rental History (if a student and never rented, provide your R.A.'s name and phone)
Current Address _____ Rent Per Person/mo \$ _____
Average utilities per person/mo \$ _____ How long at present
address? _____
Landlords Name _____ Landlords Phone _____
Reason for moving? _____ Do you smoke? (**Yes / No**)

Are you employed? (**Yes / No**) Employer _____
Phone _____ How long? _____ Monthly Income _____
If not employed, who is responsible for rent? _____

Name of Bank _____ Phone _____
Address of bank _____ City _____ State _____
Do you have a checking acct. (**Yes / No**) savings acct. (**Yes / No**)

Provide 3 Personal References (ie. Supervisors, coaches, co-workers, etc)

<u>Name</u>	<u>Relationship</u>	<u>Phone Number</u>
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Emergency Contact Information: (Students must provide parent's information)

Name _____ Phone _____
Email _____
Address _____

I certify that the above information is true and authorize verification of references and a credit check

X _____

All Tenants must fill out an application. All questions must be answered.