\$35,00 non-refundable application fee

Equity Management

P.O. BOX 8309 COLUMBUS, OHIO 43201 (614) 299-3994

RENTAL APPLICATION

CONTINUED OVER

Notice: Co-Applicant must complete a separ	rate Rental Application Form	1		
The undersigned hereby makes appli	cation to rent unit numb	per	located at	
beginning on		, at a	a monthly rental of \$	
PLEASE TELL US ABOUT YOURSELF			, <u> </u>	
FULL NAME			Phone (
Date of Birth			•	
Name of Co-Applicant			· · · · · · · · · · · · · · · · · · ·	
Number of Dependents (excluding C				
Other Occupants				
Pets (Number and Kind)				
PLEASE GIVE YOUR RESIDENCE HI				
CURRENT ADDRESS				
Month & Year Moved In			<u> </u>	
Owner or Agent				
PREVIOUS ADDRESS (If within 3 years)_			•)
Month & Year Moved In				
Owner or Agent)
PREVIOUS ADDRESS (If within 3 years) _			•)
Month & Year Moved In				
Owner or Agent				
PLEASE GIVE YOUR EMPLOYMENT			Fhore (<u> </u>
YOUR STATUS: Current MPLOYER Previous Date(s) Employed			· · · · · · · · · · · · · · · · · · ·	□ Unemployed
Supervisor				
Address			•	
ialary \$per	- 11.	If employed by	above less than 6 mon	ths, give name and address
Previous Employer or School If there are other sources of income you for confirmation. You do NOT have to re	would like us to consider, r	olease list income source	and person (Ranker Emr	oloyer, etc.) who we could cont s to consider it in this applicati
Amount \$	Sou	Jrce		
PLEASE LIST YOUR BANK AND CRE	DIT REFERENCES			
OUR BANK(S)	City-State	Branch	Type of Acct.	Acct. Number
PERIOR REFERENCES		City-State		A ad Marine
ONEON REPERVOES		•		Acct. Number
	<u> </u>			
OUR DRIVER'S LICENSE NUMBER		_	ate	
OUR VEHICLE MAKE/MODEL				
SECOND VEHICLE MAKE/MODEL		Year	Tag No	State
OTHER VEHICLES		The second secon		sidle
HAVE YOU EVER: Filed for bankru Been evicted fro	ıptcy? □ No □ \			

Willfully or intentionally refused to pay rent when due? ☐ No ☐ Yes

apply to lease the rental is to be payar and to the agent to rement made above etained to offset the deposit \$	above describle the accept this be a misre agent's cost ing days. Upproved and ance of the swill be forfeith, including and accepte ason of no ACQUAINTER, AND MOD OF TIME TO BE BEST OF THE TOTAL CELEVED BY (CECEIVED BY	pplication, please give PHONE NUMBERS where you can be located: cribed premises for the term and upon the conditions above set forth and agree day of each month in advance. As an inducement to the owner of the application, I warrant that all statements above set forth are true; however, should presentation or not a true statement of facts, \$
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