

Route W Mobile Home Court, LLC
P.O. Box 2112
Cape Girardeau, MO 63702-2112
RouteW@outlook.com
O: 573-803-1166 cell: 706-289-1901

Tenant Application

Instructions: A separate application must be filled out by each applicant (even if married). Completely fill out each blank and sign where indicated.

A copy of all applicants driver's license must be attached to application
Proof of income from employer – joint income must be no less than \$2,000.00 per month, or liquid assets acceptable to management.

PERSONAL

APPLICANT _____

MARITAL STATUS: Single Married since (date) _____ Divorced since (date) _____ Former Spouse _____
 BIRTH DATE: _____ SS# _____ DRIVERS LICENSE State Issued by _____ # _____
 Email address: _____

ADDRESSES

Present Address _____ City/State/Zip _____ Since _____ Rent/ Month _____ Present Phone (____) _____
 Present Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____
 Is present rent up to date? Yes No Have you given notice? Yes No Have you been asked to leave? Yes No

Previous Address _____ City/State/Zip _____ Since _____ Rent/ Month _____ Present Phone (____) _____
 Previous Landlord _____ Address _____ City/State/Zip _____ Phone (____) _____
 Was rent up to date? Yes No Had you given notice? Yes No Had you been asked to leave? Yes No

OTHER RENTERS

Number to occupy trailer _____ (Max Capacity = 5 including applicant)

NAME	RELATIONSHIP	BIRTHDATE

CARS

Make/Model/color #1 _____ State _____ License Plate #1 _____ Lien Holder #1 _____
 Make/Model/color #2 _____ State _____ License Plate #2 _____ Lien Holder #2 _____

EMPLOYMENT

EMPLOYER _____ Since _____ PREVIOUS EMPLOYER _____ Since _____

Street/City _____ What do you do? _____ Street/City _____ What did you do? _____

Supervisor _____ Wrk Hrs. _____ Phone (____) _____ Supervisor _____ Wrk Hrs. _____ Phone (____) _____

INCOME

Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
Current Income \$ _____ Weekly/Biweekly/Monthly/Yearly Source _____
Bank/Credit Union _____ Acct.# _____ Bank/Credit Union _____ Acct.# _____

REFERENCE

Relative _____ Relation _____ Non-Relative
Address _____ Phone (____) _____ Reference _____ Phone (____) _____
Non-Relative _____ Emergency
Reference _____ Phone (____) _____ Contact _____ Phone (____) _____

Explain any "YES" answers on back with names and details.

Has any signer ever been sued for bills? Yes No Has any signer ever been sued for eviction? Yes No
Has any signer ever been bankrupt? Yes No Has any signer ever been guilty of a felony? Yes No
Has any signer ever broken a lease? Yes No Is the total move-in amount available now (rent and deposit)? Yes No
Name in which utilities are now billed and account number _____ # _____

Applicant authorizes the owner to contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to investigate applicant.

All the information is true, accurate and complete to the best of applicant's knowledge. Owner 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 OF THIS FORM AT ANY TIME

X _____
APPLICANT DATE

X _____
APPLICANT DATE

DO NOT WRITE BELOW THIS LINE THIS SECTION TO BE COMPLETED BY INTERVIEWER		
Credit Report: (Favorable/Unfavorable) By: _____		
Other Comments: _____ _____		
Deposit: _____	Option _____	Monthly Rent _____
Unit Applied For: _____		
Terms of Lease _____		Months _____
Move-in Date _____		Lease Expires _____

If you have a question about the interpretation or legality of this form please consult an attorney or other qualified person.