



345 N. Main ▪ New Strawn, KS 66839  
(620) 364-4377 ▪ office

## Residential Rental Application

(Each adult must complete a separate application)

Date: \_\_\_\_\_

Property Address: \_\_\_\_\_ Rate: \$ \_\_\_\_\_

Date of Application: \_\_\_\_\_ Desired Move-In Date: \_\_\_\_\_

How did you hear about our property? Newspaper  Internet  Yellow Pages  Referral \_\_\_\_\_

### PERSONAL INFORMATION

Applicant's Name (As listed on SS card): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS# \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ email: \_\_\_\_\_

| Full names of all Other Residents | Relationship to You | Date of Birth |
|-----------------------------------|---------------------|---------------|
| _____                             | _____               | _____         |
| _____                             | _____               | _____         |
| _____                             | _____               | _____         |
| _____                             | _____               | _____         |
| _____                             | _____               | _____         |

### SPOUSE INFORMATION

(when applicable)

Spouse Name (As listed on SS card): \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ SS# \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ email: \_\_\_\_\_

Present Employer: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Phone #: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Position Held: \_\_\_\_\_ Income: \$ \_\_\_\_\_ per month

### RESIDENCE HISTORY

Current Address: \_\_\_\_\_ Apt # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Dates occupied: From \_\_\_\_\_ To \_\_\_\_\_

Present Landlord: (property name) \_\_\_\_\_ (contact name) \_\_\_\_\_

Phone: \_\_\_\_\_ Monthly Rent \$ \_\_\_\_\_



## EMPLOYMENT HISTORY

**Present Employer:** \_\_\_\_\_  
Employer's Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_  
Phone #: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_  
Position Held: \_\_\_\_\_ Income: \$ \_\_\_\_\_ per month

## OTHER INFORMATION

IN THE LAST 7 YEARS, HAVE YOU OR YOUR SPOUSE EVER:

Been convicted of a felony?  yes  no

If yes, please explain: \_\_\_\_\_

Had any experience with recent use, sale, manufacture or possession of illegal drugs/substances?

yes  no

If yes, please explain: \_\_\_\_\_

## PERSONAL REFERENCES

| Name  | Phone # | Relationship |
|-------|---------|--------------|
| _____ | _____   | _____        |
| _____ | _____   | _____        |
| _____ | _____   | _____        |

## IN CASE OF EMERGENCY, NOTIFY:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## AGREEMENT & AUTHORIZATION SIGNATURE

I believe that the statements I have made are true and correct. I hereby authorize a reference and/or employment check to be made, verification of information I provided and communication with any and all names listed on this application. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application and does not constitute a rental or lease agreement in whole or part. No binding obligation of any kind exists between Skillman Properties, LLC and myself, unless and until a lease is signed & a deposit is made.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_