



APPLICATION FOR TENANCY

Each Adult Must: Provide Photo ID; Complete APPLICATION, Read Our Rules. We collect as many Applications as possible. We check references for Applicants. We do not rent to anyone whose references we can't contact. We do not allow anyone to move in immediately. We require 1 personal non-relative reference knowing you 3 years. We do not rent to the 1st Applicant; we rent to BEST APPLICANT meeting requirements. We make decisions based on Personal History, not Personal Appearance. We may require Co-Signer.

Learned of vacancy ☐ AD IN PAPER ☐ FOR RENT SIGN ☐ CALLED OFFICE ☐ From NAME _____
 NAME _____ MAIDEN NAME _____ Date of Birth _____

Address or type of unit applied for _____ Rent \$ _____ Possession Date _____
 HOME\MESSAGE

PHONE # _____ YOU _____ PHONE# _____
 NAMES AND RELATIONSHIPS OF EVERYONE WHO WILL OCCUPY UNIT including ages of minors:

1. _____ 2. _____

Provided Landlord 30-Days' Written Notice? Yes ☐ No ☐ If on SECTION 8: How many years? _____ Total rent? \$ _____ Your share \$ _____

SOCIAL SEC.# _____ DRIVER'S LICENSE # _____ STATE _____ EXP-DATE _____ PHOTO ID _____
IMPORTANT! INCLUDE 3 YRS LANDLORD /EMPLOYMENT/INCOME REFERENCES! Use back side if needed.

PRESENT ADDRESS _____ PRESENT LANDLORD _____ PHONE _____
 Dates of Occupancy MO _____ YR _____ --- MO _____ YR _____ Rent \$ _____ Reason for Moving _____

PREVIOUS ADDRESS _____ LANDLORD _____ PREVIOUS PHONE _____
 Dates of Occupancy MO _____ YR _____ --- MO _____ YR _____ Rent \$ _____ Reason for Moving _____

EMPLOYER'S NAME _____ COMPANY _____ PHONE _____

ADDRESS _____ HOW LONG? _____ POSITION _____

SHIFT: Day _____ Night _____ Supervisor _____ PHONE _____ Subject to transfer? Yes _____ No _____

INCOME SOURCE #1 _____ APPROXIMATE MONTHLY AMOUNT \$ _____ HOW LONG? _____

INCOME SOURCE #2 _____ APPROXIMATE MONTHLY AMOUNT \$ _____ HOW LONG? _____

OUTSTANDING LOAN _____ BALANCE DUE _____ MONTHLY PAYMENT \$ _____

OUTSTANDING LOAN _____ BALANCE DUE _____ MONTHLY PAYMENT \$ _____

BANK/CREDIT UNION & ADDRESS _____ Checking Account? Yes ☐ No ☐ Savings Account? Yes _____ No _____

RENT PAYMENTS EVER BEEN LATE? Yes _____ No _____ EVER BEEN EVICTED? Yes _____ No _____ If yes, explain on back

ABLE TO MEET REQUIREMENTS OF TENANCY THAT APPLY TO ALL TENANTS? Yes _____ No _____ May make extra comments on back side.

PLAN IN-RESIDENCE BUSINESS ACTIVITIES? Yes _____ No _____ If yes, explain _____

CAN OBTAIN A CO-SIGNER? Yes _____ No _____ If yes, name of person _____

HAVE\EXPECT TO HAVE PETS? Yes _____ No _____ If yes, what? _____

UTILITIES: You can get IN YOUR NAME? ☐ WATER ☐ SEWER ☐ GARBAGE PICKUP ☐ GAS ☐ ELECTRIC ☐ NONE

NUMBER OF CARS _____ NUMBER OF LICENSED DRIVERS _____ NAMES _____

Make #1 _____ Year #1 _____ License #1 _____ Make #2 _____ Year #2 _____ License #2 _____

NON-RELATIVE REFERENCE _____ Address _____ Phone _____

NEAREST LIVING RELATIVE _____ Address _____ Phone _____

EMERGENCY CONTACT _____ Address _____ Phone _____

I authorize Landlord to check information for verification by all available means: consumer reporting agencies, public records, and current/previous rental property owners/employers/personal references. Re-verification or investigation of preliminary findings is not required. If any of my answers are found to be incorrect, any Rental Agreement becomes void & will be sufficient reason for eviction & loss of Security Deposit. I also authorize verification of Employment, Military status, Bank accounts, Credit History [including Credit Bureau Report], Criminal Records, Rental history. Income, Evictions\Judgments, Student status. I declare that my Rental history & Credit records are in good standing & understand that if I am accepted & fail to complete this transaction by promptly signing any required papers, any deposit will be forfeited.

"We welcome qualified tenants without regard to race, color, creed, religion, sex, marital status, familial status, age, national origin, sexual orientation, disability or gender identity. If you feel you have experienced discrimination, you may file a complaint with the Davenport, Civil Rights Commission, 226 W. 4th St., Davenport, (563) 326-7888 or (563) 326-7959 TTY. For discriminatory housing practices that occur outside the City of Davenport contact the Iowa Civil Rights Commission at (800) 457-4416 or the U.S. Department of Housing and Urban Development at (800) 743-5323."

APPLICANT'S SIGNATURE _____

DATE _____