

# Sabra Property Management LLC

## Rental Application

Applicant Name: \_\_\_\_\_  
First Middle Last

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number \_\_\_\_-\_\_\_\_-\_\_\_\_

Marital Status: \_\_\_\_\_ Single \_\_\_\_\_ Married \* (Maiden name - if applicable: \_\_\_\_\_)

Spouse's Name: _____ First Middle Last
Spouse's Date of Birth ____/____/____ Spouse's Social Security Number ____-____-____

Number of Occupants: \_\_\_\_\_ Names/Age of Occupants: \_\_\_\_\_

Pet's: \_\_\_\_\_ Yes (How many? \_\_\_\_\_) or \_\_\_\_\_ No

\*Description: \_\_\_\_\_ \*(No aggressive breeds & additional deposit may apply).

### Resident History

#### Present Residence:

\_\_\_\_\_ Apt. # \_\_\_\_\_ City State Zip Code (\_\_\_\_)\_\_\_\_-\_\_\_\_  
Present Address Home Telephone

\_\_\_\_\_ months / years \$ \_\_\_\_\_ (\_\_\_\_)\_\_\_\_-\_\_\_\_  
How long at present address? Rent Amount Name of Owner/Apartments Landlord's Telephone #

**\*Previous Residence: (complete below if you lived at above address for less than 2 years)**

\_\_\_\_\_ Apt. # \_\_\_\_\_ City State Zip Code (\_\_\_\_)\_\_\_\_-\_\_\_\_  
Prior Address Home Telephone

\_\_\_\_\_ Years \_\_\_\_\_ Months \$ \_\_\_\_\_ (\_\_\_\_)\_\_\_\_-\_\_\_\_  
\*How long at present address? Rent Amount Name of Owner/Apartments Landlord Telephone #

### Employment History

#### Employment:

\_\_\_\_\_ months / years \$ \_\_\_\_\_ .00  
Company Name Supervisor Name Length of Employment Job Title Monthly Income  
(gross)

\_\_\_\_\_ (\_\_\_\_)\_\_\_\_-\_\_\_\_  
Company Address City State Zip Code Telephone

Spouse's Employment:

_____ months / years \$ _____ .00
Company Name Supervisor Name Length of Employment Job Title Monthly Income
Address City State Zip Code Telephone (gross)

#### Automobile(s):

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Year Make Model Color License Plate # State

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Year Make Model Color License Plate # State

#### IN CASE OF EMERGENCY:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Nearest Relative Relationship Telephone Address City State Zip Code

The undersigned represents the above statements are true and complete and authorize verification of information and reference given. A \$\_\_\_\_\_ non-refundable application fee is charged to process the rental application. It is understood a good faith/reservation fee received \$\_\_\_\_\_ will be returned if applicant is not accepted as a resident. If accepted and the resident does not move in on the starting date given, the amount received is hereby acknowledged as liquidated damages for non-performance and will not be returned to the applicant as compensation for holding the apartment off the market. I understand I may cancel this application by **Written notice within 72 HOURS OF DATE APPLIED** and receive a full refund of reservation fee. If I cancel after 72 hours, I understand I lose the good faith reservation fee. After application approval and apartment inspection, but prior to move-in, I authorize management to release and apply the reservation fee toward a security deposit of \$ \_\_\_\_\_ dollars. **\*(Sign and Date below)**

\_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_/\_\_\_\_\_/20\_\_\_\_\_  
Applicant's Signature Date Spouse's Signature Date

OFFICE USE ONLY Source: \_\_\_\_\_

Expected Move-In Date: ____/____/20____ Address: _____
Rental Rate: \$ _____ Lease Term: _____ Months Unit Size: _____ Deposit: \$ _____

( ) APPROVED ____/____/20____ By _____ ( ) DISAPPROVED
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