

Springhill Apartments
1516 East Springhill Drive
Terre Haute, IN 47802
(812) 299-9842 (812) 299-9943 Fax

RENTAL APPLICATION

This rental application and the information contained herein is to be used by Norman Froderman for the purposes of determining the type and size of living quarters that might be needed by the applicant; and in addition, in the event of an emergency will be utilized in order to locate the necessary persons to transmit the details of any emergency occurrence. Please fill in the blanks carefully and if you object to any question, please indicate the same on the application. The information contained herein will only be utilized by Norman Froderman, or his authorized representative as is necessary to determine the most appropriate accommodations for you, and such information contained herein will be kept confidential and will not be disseminated without your prior approval.

Apt No. _____	Monthly Rent _____	Security Deposit _____	Today's Date _____
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Applicant's Name _____ DOB _____ Telephone _____
Street Address _____ City _____ State _____ Zip _____
How long at this address? _____ Current rent paid _____ Driver's license # & State _____
Owner's name _____ Address _____ Telephone _____
Applicant's Social Security # _____ Do you have any pets? _____
Employer _____ Address _____ Telephone _____
Kind of Work _____ How long? _____ Monthly Income _____
Name of Your bank _____
Name of co-resident _____ Social Security No. _____
Co-resident Employer _____ Address _____ Telephone _____
Co-resident kind of work _____ How long? _____ Monthly income _____

List all persons to be occupying the premises (include children, relatives, & co-residents)		
Name _____	Age _____	Relationship _____
Name _____	Age _____	Relationship _____
Name _____	Age _____	Relationship _____

PAST TWO LANDLORDS: (The two most recent)
Name _____ Address _____ Telephone _____
Name _____ Address _____ Telephone _____

Why are you leaving your present residence? _____
Any past due rent or mortgage payments? If so explain. _____
Have you or your co-resident ever been evicted? _____
Have you or your co-resident ever been convicted of a felony? _____

Nearest relative _____ Address _____ Telephone _____

I hereby grant to Norman Froderman, or his authorized representative the right to verify any of the information contained herein, and I believe that the information that I have submitted on this form is true and accurate to the best of my knowledge.

Signed _____ Signed _____

Tenant Authorization to Obtain Credit Report

And

Authorization to Contact Previous Landlords

The undersigned hereby authorizes Norman Froderman, or his authorized representative to obtain a credit report(s) for the purpose of evaluating them as a prospective tenant.

In addition, by signing this document the undersigned hereby authorizes Norman Froderman, or his authorized representative to contact previous landlords for the purpose of evaluating them as a prospective tenant.

_____ Signature	_____ Date
_____ Name Printed	_____ Social Security Number
_____ Last Address	

_____ Signature	_____ Date
_____ Name Printed	_____ Social Security Number
_____ Last Address	

_____ Signature	_____ Date
_____ Name Printed	_____ Social Security Number
_____ Last Address	