

Shamrock Condo Rental Application

Date ____/____/____

Which unit(s) are you applying for: Ranch I ____ Ranch II ____ Ranch III ____ Townhouse ____

*Please list all units you are interested in and in order of preference 1-4 [1] being your first choice.

Would you prefer ____first or ____second floor. Please number 1 and 2 or number both 1 if you don't care which floor. If you just want the 1st floor then only mark that.

Approximate move in date ____/____/____ Estimated number of years staying _____

Everyone over the age of 18 must fill out a separate application and verification form.

Name of the applicant:

First: _____ Middle _____ Last _____

Date of Birth _____ Social Security Number _____ Home Phone _____

Cell _____ Work _____ Email address _____

Marital Status: Married Single Divorced Separated

Present Address _____ City _____ State ____ Zip _____

Length of time there _____ Present rent _____

Landlord _____ Landlord Phone _____ Landlord Fax _____

Do you have any roommates currently _____

Previous Address _____ City _____ State ____ Zip _____

Length of time there _____ Previous Rent _____

Landlord _____

Have you ever been convicted of any unlawful conduct? ____ Yes ____ No if yes, please explain _____

Have you ever been evicted? ____ Yes ____ No if yes, please explain _____

Have you any pets? (Extra fee for pets) ____ Yes ____ No if yes, list all and describe _____

List the name and age of everyone that will be living in the unit: _____

Employment

Present Employer _____ Position _____ From _____ To _____

Address _____ Phone _____ Income _____

Previous Employer _____ Position _____ From _____ To _____

Address _____ Phone _____ Income _____

Car Information

Make _____ Model _____ Year _____ Liscense _____ Color _____

Make _____ Model _____ Year _____ Liscense _____ Color _____

In the event of an emergency contact: _____ Relationship _____

Address _____ Phone _____

I hereby authorize any person or company to supply you with any information requested concerning me. I understand that misrepresentation or concealment relative to any of the above facts will at Lessors' option void my rights under any agreements entered into for the rental premises being applied for.

Print Name _____

Signature _____ Date _____

How did you here about us? _____

Please include a copy of your driver's license.



Condominiums + Studios + Storage
 1724 East Wooster, Bowling Green, Oh 43402
 phone/fax 419-354-0070
 website: ShamrockBG.com
 email: info@shamrockbg.com

Resident Rental Verification and History Request

To whom it may concern:

A former/current tenant of yours named below has applied for a rental unit at Shamrock Village. We would like to verify the past or present rental history. The requested information is for determining eligibility and will be kept in strict confidence. Please complete and fax the following information as soon as possible to 419-354-0070. Feel free to call us with any questions. Thank you.

Applicant, please fill out this section:

In order to complete my rental application at Shamrock Village Condominiums, I request that the following information be released to Shamrock Village with my permission.

Applicant's Name: _____ Date: _____

Applicant's Signature: _____

Applicants Current Address: _____

Property manager, please fill out this section:

The tenant listed above is: A Current Resident or A Past Resident

Lease Terms Move in date: _____ is the tenant on a set lease or a month to month

Lease expiration date: _____

Other names on lease: 1. _____

2. _____

Notification of Move out Was proper notice given? **YES or NO**

Number of days you require for notice: _____

Payment History Rent amount paid: \$ _____ Number of late charges: _____

Number of NSF checks: _____

How many times was the rent late? _____

Was an eviction notice given? **YES or NO**

Other Information Number of occupants: _____ unauthorized occupants: _____

Pets: _____ If yes, what kind? _____

Noise Complaints: **YES or NO** If yes, how many? _____

Did/will the tenant get there security deposit back? **YES or NO**

What was the cost of damages to the unit at move out \$ _____

Would you re-rent to this tenant? **YES or NO**

Additional Comments _____

 Name/Title of Person Supplying Information

 Firm/ Organization

 Signature

 Date