

RENTAL APPLICATION

Franklin Park

2407 Neil Armstrong Dr, West Lafayette, IN 47906

Phone: (765) 463-4578 Fax: (765) 463-9198 Email: FranklinParkApartments@comcast.net

TYPE OF APARTMENT DESIRED: _____ DATE NEEDED: _____

APPLICANT NAME: _____ Date of Birth: _____

Home or Cell Phone: _____ Work Phone: _____

SSN or Passport #: _____ Driver's License # & State: _____

Email Address: _____

CURRENT Address _____ City _____ State _____ Zip _____

Landlord _____ Rent Amount _____ How Long at this Address _____

County _____ Reason for moving _____

PREVIOUS Address _____ City _____ State _____ Zip _____

Landlord _____ Rent Amount _____ How Long at this Address _____

County _____ Reason for moving _____

STUDENT STATUS School _____ Major _____

Graduate Student YES _____ NO _____ Year in School _____

EMPLOYER _____ Position Held _____ Employed How Long _____

Supervisor's Name _____ Phone _____ Hrs/Wk _____ \$/Hr _____

Net Income per Month (After Deductions) _____

OTHER SOURCES OF INCOME \$ Amount / Month _____ Source _____

PARENT INFORMATION Name(s) _____ Phone: _____

Address _____ City _____ State _____ Zip _____

PARENT INFORMATION Name(s) _____ Phone: _____

Address _____ City _____ State _____ Zip _____

EMERGENCY CONTACT _____ Phone _____ Relationship _____

Address _____ City _____ State _____ Zip _____

VEHICLE INFORMATION (Vehicle to be parked on premises) Color _____ Year _____

Make _____ Model _____ License Plate # _____ State _____

Franklin Park is a quiet community. Will you be able to comply with rules regarding noise? _____

PETS? _____ If yes, please list: _____

Have you ever been EVICTED or CONVICTED? ____ (If yes, Please explain on a separate sheet of paper)

Have you ever filed for bankruptcy? ____ When? _____ Reason? _____

Applicant's Largest Creditor (Car Loan, Credit Card) _____ Monthly Amt _____

Name and relationship of every person who will be living in the apartment (include ages of minor children)

I declare that the statements above are TRUE and CORRECT and I hereby authorize a credit and background check. Also, I hereby authorize my current or previous landlord to release the requested information regarding my tenancy. This information will be used in verification of my RENTAL APPLICATION. Once applicant is approved for this unit, Security Deposit is no longer refundable until the end of their lease.

APPLICANT SIGNATURE _____ DATE _____