## **Salisbury Green - Rental Application**

(To be completed by all occupants 18 yrs. or older)

Property Name F	referred Apartment Size	_ Est. Date of Occupancy _	Unit # (if known)
Name	SS#	DOB	License #
Address	City	StateZip	pPhone
1) Present Landlord	Phone	Length of Occ.	Rent \$
Landlords Address	Cit	tyState_	Zip
2) Previous Address	City	State	Zip
Previous Landlord	Phone	Length of Oc	ecRent \$
Employer	Address		Phone #
Position:	Length:	Salary \$	
Other Income	Source	SourceAmount \$	
	state or national offender che	ecklist?Yes	nnulled by a court of law?Yes_ _No. In the space below give the d
ack of explanation or failure to complete	e this section will be a basis for re	ejection of your application or t	termination of tenancy after occupancy.)
Personal references not related to y	ou: Name	Phone #	
Name	Phone #		
Vehicle Information: Make:	Model	Year	Plate #
Name of nearest relative NOT livin	ving with you: Phone #		
Relationship	Address		
Name all others who will reside in	this apartment:		
Name:	Age:	Relationship:	
Name:	Age:	Relationship:	
Do you have any pets?	_Yes No If yes	s, please describe	·
The Hodges Companies reserves	the right to use any and all i	nformation contained in th	nis application for any lawful purpos
*I certify that the information or understand that my Application	n the application is accurate may be rejected if subsequen that any such misrepresenta	true, and complete to the	e best of my knowledge and belief cates I have made misrepresentatio me shall be grounds for terminatio
I HEREBY AUTHORIZE THE I			
REGARD TO THIS APPLICAT			
Signature of Applicant: Signature of Rental Agent:	<del></del>		Date Date