

RENTAL APPLICATION

THE MORGAN COMPANY REAL ESTATE CENTER
609 W. MISSION AVE. \* BELLEVUE, NE 68005
402-291-1130 FAX 402-291-6797
www.morganrecenter.com



I hereby make application to rent \_\_\_\_\_ to be used as a dwelling unit.

Your Information

Full legal name: \_\_\_\_\_ Phone number: (\_\_\_\_) \_\_\_\_\_
Social security number: \_\_\_\_\_ Date of birth: \_\_\_\_\_
Driver's license #: \_\_\_\_\_ State issued: \_\_\_\_\_

Current Address

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Landlord's Name: \_\_\_\_\_
Landlord's Phone: (\_\_\_\_) \_\_\_\_\_
Reason For Moving: \_\_\_\_\_
Monthly Rent: \$ \_\_\_\_\_
When did you move in? \_\_\_\_\_ out? \_\_\_\_\_
Do you rent this residence? [ ] Yes [ ] No
Is your name on the lease? [ ] Yes [ ] No
Have you given written notice to leave? [ ] Yes [ ] No

Previous Address

Address: \_\_\_\_\_ Apt #: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Landlord's Name: \_\_\_\_\_
Landlord's Phone: (\_\_\_\_) \_\_\_\_\_
Reason For Moving: \_\_\_\_\_
Monthly Rent: \$ \_\_\_\_\_
When did you move in? \_\_\_\_\_ out? \_\_\_\_\_
Did you rent this residence? [ ] Yes [ ] No
Was your name on the lease? [ ] Yes [ ] No
Did you give written notice to leave? [ ] Yes [ ] No

Do you have any pets: \_\_\_\_\_ If yes how many: \_\_\_\_\_
What kind: \_\_\_\_\_

\*\*\* PET DEPOSIT IS ONE-QUARTER OF 1 MONTHS RENT\*\*\*

Your Current Employment

Name of employer: \_\_\_\_\_ Your position: \_\_\_\_\_
Address: \_\_\_\_\_ Your start date: \_\_\_\_\_
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Employer's phone number: (\_\_\_\_) \_\_\_\_\_
Your supervisor: \_\_\_\_\_ Monthly Salary: \_\_\_\_\_ [ ] Gross [ ] Net

Your Personal History

Have you ever...
been asked to move out or evicted? [ ] Yes [ ] No broken a rental agreement or lease? [ ] Yes [ ] No
declared bankruptcy? [ ] Yes [ ] No [ ] No been sued for nonpayment of rent? [ ] Yes [ ] No
been sued for damage to a rental unit? [ ] Yes [ ] No [ ] No been convicted of a felony? [ ] Yes [ ] No

Your Vehicle

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_
License Plate Number: \_\_\_\_\_ State: \_\_\_\_\_

Other Residents: List the legal names and ages of ALL other people who will occupy this unit.

Names & Ages \_\_\_\_\_

In Case of Emergency:

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Please Read Carefully

I hereby state and represent that the information in this application is complete and accurate. I understand that in the event a lease is entered into it may be cancelled by the Landlord if any of the information provided in the application is materially inaccurate or incomplete. I hereby authorize the Landlord or Landlord's agents to verify the information on the application. Verification or re-verification of any information contained in the application will be retained by Landlord. I hereby authorize Tenant Data Services Inc. to obtain information about me, including, but not limited to, this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, and I hereby authorize & instruct any entity or person contacted by Tenant Data Services Inc. or the Landlord or Landlord's agents to release such information to them. Upon request, Landlord, Landlord's agents, or Tenant Data will provide the name & phone number of the source of the information used in the verification process.

Rent Amount: \_\_\_\_\_ Security Deposit: \_\_\_\_\_ Lease Term: \_\_\_\_\_ Move-in date: \_\_\_\_\_
Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



Non-Refundable Application Fee: \$20.00

