

CB MANAGEMENT SERVICES INC.

3333 Madison Pike, Suite C
Fort Wright, KY 41017
859-578-8500
859-414-3144 Johnathon Stephens
jstephens@cbman.com

RENTAL APPLICATION

Application fee \$50.00 per applicant. All persons over the age of 18 must fill out a Rental Application. Applicant must provide current, valid ID and proof of income. Application fees are non-refundable.

The undersigned hereby makes application to rent the premises located at _____, beginning on _____, 20____, at a monthly rental rate of \$ _____

PLEASE TELL US ABOUT YOURSELF

FULL NAME: _____ Phone: (____) _____
Date of Birth: _____ Social Security No.: _____ Email Address _____
Name of Co-Applicant: _____ Phone: (____) _____
Date of Birth: _____ Social Security No.: _____ Email Address _____
Number of Dependents _____
List names, ages, date of birth and social security number of all other occupants who will live in the residence:

Pets: (number, kind & breed) _____

PLEASE GIVE US YOUR RESIDENCE HISTORY FOR THE PAST THREE YEARS

(BEGIN WITH MOST CURRENT)

CURRENT ADDRESS _____
Month & year moved in _____ Reason for leaving _____
Owner or agent _____ Phone (____) _____
Monthly rent amount _____ Fax # (____) _____
PREVIOUS ADDRESS (if within 3 years) _____
Month & year moved in _____ Reason for leaving _____
Owner or agent _____ Phone (____) _____
Monthly rent amount _____ Fax # (____) _____

PLEASE GIVE US YOUR EMPLOYMENT INFORMATION FOR THE PAST THREE YEARS

STATUS: [] Employed full time [] Employed part time [] Student [] Retired [] Unemployed
CURRENT EMPLOYER: _____
Date Employed: _____ Employed As: _____
Supervisor: _____ Phone Number: _____
Company Address: _____
Salary: \$ _____ per _____ Please provide copy of W-2 or most current pay stub to support

CO-APPLICANT EMPLOYER: _____
Date Employed: _____ Employed As: _____
Supervisor: _____ Phone Number: _____
Company Address: _____
Salary: \$ _____ per _____ Please provide copy of W-2 or most current pay stub to support

If there are other sources of income you would like us to consider, please list income, source and person/company who we could contact for confirmation. All applicants, 18 years and older, must provide picture identification and proof of income for this application to be considered.

PLEASE LIST YOUR BANK AND CREDIT REFERENCES

Bank	City/State	Branch	Type of Account
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

References
1. _____
2. _____
3. _____

Driver's License Number _____ State _____
Vehicle Make/Model _____ Year _____ Tag Number _____ State _____
Vehicle Make/Model _____ Year _____ Tag Number _____ State _____
Other Vehicles _____

EMERGENCY CONTACT Name _____ Number _____

Have you or any proposed occupant ever:

Filed for bankruptcy? [] No [] Yes If Yes, when was a discharge granted? _____

Been evicted from any tenancy? [] No [] Yes

Willfully or intentionally refused to pay rent when due? [] No [] Yes

Do you have any pending judgments or legal proceedings pending against you? [] No [] Yes

If Yes, explain _____

Been convicted of a Felony? [] No [] Yes

Been convicted of any crime involving the use, possession, distribution or intent to distribute a controlled substance? [] No [] Yes

Please give any additional information that might help management evaluate this application:

If management has any questions about this application, please give PHONE NUMBERS where you can be reached:

DAY PHONE: _____ EVENING PHONE: _____

I hereby apply to lease the above-described premises for the term and upon the conditions above set forth and agree that the rent is to be payable the 1st day of each month in advance. As an inducement to the owner of the property and to the agent to accept this application, I warrant that all statements above set forth are true; however, should any statement made above be a misrepresentation or not a true statement of facts all earnest money will be retained to offset the agent's cost, time and effort in processing my application. Once an application is approved, security deposit must be paid immediately to place the property on hold for up to thirty days. If prospect cancels, security deposit(s) are not refundable.

I RECOGNIZE THAT AS PART OF YOUR PROCEDURE FOR PROCESSING MY APPLICATION, AN INVESTIGATIVE CONSUMER REPORT AND/OR A CRIMINAL BACKGROUND CHECK MAY BE OBTAINED. IN ADDITION, EMPLOYMENT VERIFICATION AND RESIDENCY VERIFICATION WILL BE REQUESTED. I HEREBY AUTHORIZE C. B. MANAGEMENT SERVICES, INC. TO MAKE SUCH INQUIRES AND THIS SHALL SERVE AS AUTHORIZATION TO ALL NECESSARY PARTIES TO RELEASE REQUESTED INFORMATION.

The above information, to the best of my knowledge, is true and correct. This Application, upon execution of a Lease Agreement shall be incorporated into the Lease and made a part thereof.

Signature of Applicant _____ Date Signed _____

Signature of Co-Applicant _____ Date Signed _____

WE ARE AN EQUAL OPPORTUNITY HOUSING PROVIDER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, GENDER, DISABILITY, NATIONAL ORIGIN, RELIGION OR FAMILIAL STATUS.

DEPOSIT OF \$ _____ RECEIVED BY (NAME) _____ DATE _____

APPLICANT: DO NOT WRITE BELOW THIS LINE

APPLICATION RECEIVED BY: _____ DATE _____

COPY OF DRIVER'S LICENSE OR PHOTO ID MADE BY (NAME) _____ DATE _____

Reference Verification Name	Reference Comments		
_____	ID _____	Income _____	Credit Score _____
_____	_____	_____	_____
_____	ID _____	Income _____	Credit Score _____
_____	_____	_____	_____

This application [] approved [] not approved by agent _____

Applicant Notified Via _____ Date Notified _____