

**CB MANAGEMENT SERVICES INC.**

3333 Madison Pike, Suite C  
Fort Wright, KY 41017  
859-578-8500  
859-414-3144 Johnathon Stephens  
[istephens@cbman.com](mailto:istephens@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 on the 1<sup>st</sup> 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, Holding Fees must be paid immediately to place the property on hold for up to thirty days. If the prospect cancels, Holding Fee(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 THE 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.**

HOLDING FEE 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 _____
_____	ID _____	Income _____	Credit Score _____

This application [ ] approved [ ] not approved by agent \_\_\_\_\_

Applicant Notified Via \_\_\_\_\_ Date Notified \_\_\_\_\_