

# FOR RENT

ONE YEAR LEASE

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**2694 East Oakleaf Dr. Tempe , AZ. 85281**

**\$1350.00 per month**

**Security Deposit \$1350.00 Refundable**

**Cleaning Deposit \$200.00**

**NO PETS ALLOWED**

**NO APPLICATION FEE**

PLEASE SUBMIT A COPY OF YOUR DRIVER'S LICENSE

One application for each adult

OWNER will pay for a BACKGROUND CHECK...YOU WILL  
NEED TO ACKNOWLEDGE

AGREEMENT TO PROCEED WHEN IT IS EMAILED TO YOU !

Including a letter of introduction to Landlord is NICE too.

PLEASE SCAN and EMAIL ALL to: [PamPeacock@aol.com](mailto:PamPeacock@aol.com)

Kindly text me when email is sent and email address sent  
from too. Thank You

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602-505-0257 ( so much goes in spam and trash..need

# APPLICATION FOR OCCUPANCY



The pre-printed portion of this form has been drafted by the Arizona Association of REALTORS®. Any change in the pre-printed language of this form must be made in a prominent manner. No representations are made as to the legal validity, adequacy and/or effects of any provision, including tax consequences thereof. If you desire legal, tax or other professional advice, please consult your attorney, tax advisor or professional consultant.



1. Address of Rental Property Applying for: 2694 East Oakleaf Drive , TEMPE, , 85281

## APPLICANT PERSONAL INFORMATION

2. NAME: \_\_\_\_\_
3.  Single  Married  Separated  Divorced (date of decree) \_\_\_\_\_
4. EMAIL ADDRESS \_\_\_\_\_ TELEPHONE \_\_\_\_\_
5. SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_
6. DRIVER'S LICENSE / GOVERNMENT ISSUED ID NUMBER \_\_\_\_\_ STATE \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_
7. DESIRED DATE OF OCCUPANCY \_\_\_\_\_ DESIRED LENGTH OF LEASE \_\_\_\_\_
8. How did you hear about us?
9.  Sign  Our website  Ad  Referral: \_\_\_\_\_  Other: \_\_\_\_\_

## EMPLOYMENT & BANK REFERENCES (Minimum one year verified employment required)

10. Current Employer: \_\_\_\_\_
11. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
12. Telephone: \_\_\_\_\_ How long?: \_\_\_\_\_ Start date: \_\_\_\_\_
13. Department/Position: \_\_\_\_\_ Approximate Monthly Gross Income: \$ \_\_\_\_\_
14. If you have been with your current employer less than one year, please complete the following:
15. Previous Employer: \_\_\_\_\_
16. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
17. Telephone: \_\_\_\_\_ How long?: \_\_\_\_\_ Date left: \_\_\_\_\_
18. Please provide a valid, enlarged copy of your current driver's license or government issued photo ID and your 2 most
19. recent paystubs or proof of income.
20. Bank: \_\_\_\_\_ Branch: \_\_\_\_\_
21. Telephone: \_\_\_\_\_
22. Account Number (checking): \_\_\_\_\_ Account Number (savings): \_\_\_\_\_
23. Other Income: \_\_\_\_\_ (Indicate source & amount)

## RESIDENCE HISTORY (Minimum one year required)

24. Current Rent/Mortgage Payment: \$ \_\_\_\_\_ How long?: \_\_\_\_\_  Own  Rent
25. Current Address: \_\_\_\_\_
26. City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
27. Landlord: \_\_\_\_\_ Telephone: \_\_\_\_\_
28. If owned, please provide mortgage company name and address:
29. Mortgage Company: \_\_\_\_\_ Telephone: \_\_\_\_\_
30. Address: \_\_\_\_\_
31. City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
32. If you have been at your current address less than one year, please complete the following:
33. Previous Address: \_\_\_\_\_
34. City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
35. How Long?: \_\_\_\_\_



**PERSONAL REFERENCES**

- 36. 1. Name: \_\_\_\_\_ Relation: \_\_\_\_\_
- 37. Address: \_\_\_\_\_ Telephone: \_\_\_\_\_
- 38. 2. Name: \_\_\_\_\_ Relation: \_\_\_\_\_
- 39. Address: \_\_\_\_\_ Telephone: \_\_\_\_\_
- 40. 3. Name: \_\_\_\_\_ Relation: \_\_\_\_\_
- 41. Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

**DEPENDENTS/ADDITIONAL OCCUPANTS**

- 42. Number of people who will occupy residence: \_\_\_\_\_
- 43. List occupants and their birthdates - CREDIT AND CRIMINAL BACKGROUND CHECKS WILL BE RUN ON EACH PERSON 18 & OVER.
- 44. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ D.O.B.: \_\_\_\_\_
- 45. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ D.O.B.: \_\_\_\_\_
- 46. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ D.O.B.: \_\_\_\_\_
- 47. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ D.O.B.: \_\_\_\_\_
- 48.  Additional occupants, see attached.
- 49. Person(s) to notify in case of emergency and that you authorize to enter and take possession of your personal property in the event of
- 50. death, pursuant to A.R.S. §33-1314(F), disability or incarceration:
- 51. Name: \_\_\_\_\_
- 52. Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_
- 53. Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**PETS/SERVICE ANIMALS**

- 54. Will you have pets?  Yes  No (assistive and service animals are not considered "pets")
- 55. Description of pets (recent photo required):
- 56. Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Weight: \_\_\_\_\_
- 57. Breed: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Weight: \_\_\_\_\_
- 58. Will you have an assistive or service animal?  Yes  No (accommodation request required with application)

**VEHICLE INFORMATION**

- 59. Total Number of Vehicles (including company vehicles): \_\_\_\_\_
- 60. Vehicles:
- 61. Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Lic. Plate #: \_\_\_\_\_
- 62. Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Lic. Plate #: \_\_\_\_\_
- 63. Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_ Lic. Plate #: \_\_\_\_\_
- 64. Description of any other vehicles (boat, trailer, truck, recreational vehicle, etc.) you would like to keep on property:
- 65. \_\_\_\_\_
- 66. Prior written permission separate from this application must be obtained from management.

**CREDIT AND BACKGROUND HISTORY**

(ANSWER ALL QUESTIONS FOR YOURSELF AND FOR ANYONE WHO WILL OCCUPY THIS RESIDENCE)

- 67. Have you ever been evicted?  Yes  No
- 68. Has a notice of eviction ever been filed against you?  Yes  No If so, when: \_\_\_\_\_
- 69. Have you ever declared bankruptcy?  Yes  No If so, when: \_\_\_\_\_ Discharge Date: \_\_\_\_\_
- 70. Have you had two or more late rental payments in the past year?  Yes  No
- 71. Have you ever willfully or intentionally refused to pay rent when due?  Yes  No
- 72. Do you currently owe any monies to an apartment community or landlord?  Yes  No
- 73. Do you use illegal drugs?  Yes  No
- 74. Have you ever engaged in the distribution or sale of illegal drugs?  Yes  No
- 75. Have you ever been convicted, arrested or charged with any crime?  Yes  No
- 76. Please give detailed explanation(s), date(s), and names for any question answered 'Yes' above: \_\_\_\_\_
- 77. \_\_\_\_\_
- 78. \_\_\_\_\_
- 79. Do you have any outstanding warrants or anticipate any warrants for arrest?  Yes  No



**ADDITIONAL INFORMATION**

- 80. Have you or anyone in your household had, or do you presently have, bed bugs or other pest issues?  Yes  No
- 81. If yes, please explain: \_\_\_\_\_
- 82. Please give any information that might help evaluate this application: \_\_\_\_\_
- 83. \_\_\_\_\_
- 84. \_\_\_\_\_
- 85. \_\_\_\_\_

**DEPOSIT TO HOLD AGREEMENT**

- 86. In consideration of management holding this property for me, I agree to pay:
- 87. Earnest/holding deposit of a minimum of \$ \_\_\_\_\_ and
- 88. A non-refundable application fee of \$ \_\_\_\_\_ per person over 18 in CERTIFIED FUNDS ONLY\*
- 89. \*Additional fees will apply for non-U.S. residents and will vary according to current rates. IF YOU ARE A NON-US RESIDENT, PLEASE
- 90. CALL FOR CORRECT APPLICATION FEE AMOUNT BEFORE APPLYING. Non-resident application fee \_\_\_\_\_
- 91. The earnest/holding deposit is refundable if my application is not approved (14-day delay required for bank clearance of check). If my
- 92. Application is approved, the earnest/holding deposit is credited to the required move-in costs. IF APPLICANT SHOULD WITHDRAW
- 93. THIS APPLICATION WITHIN 7 DAYS AFTER WRITTEN NOTIFICATION OF ACCEPTANCE, a minimum of \$ \_\_\_\_\_
- 94. of the earnest/holding deposit WILL BE RETAINED in addition to the non-refundable application fee. IF AFTER 7 DAYS OF
- 95. NOTIFICATION OF ACCEPTANCE, APPLICANT WITHDRAWS OR FAILS TO EXECUTE LEASE AGREEMENT, ALL EARNEST/
- 96. HOLDING DEPOSIT MONIES WILL BE FORFEITED. UNDER NO CONDITIONS WILL APPLICATION FEE BE REFUNDED.
- 97. Total deposits/fees submitted with application \$ \_\_\_\_\_
- 98. I hereby authorize and instruct Owner/Broker/Property Manager to investigate the information supplied by me and to conduct inquiries
- 99. concerning my income, credit and character for the purpose of verifying and qualifying for this rental and any renewals thereof. I further
- 100. authorize the release of any and all information available from any reference, former owners, and credit reporting services, department of
- 101. motor vehicles, and governmental agencies. I hereby release and hold harmless all parties from liability for any damages that may result
- 102. from furnishing this information to its owners, its agents and others. NOTE: Copy of actual credit report will **not** be provided to applicant
- 103. by Owner/Broker/Property Manager.
- 104. Applicant acknowledges that Owner/Broker/Property Manager may not be able to complete a comprehensive evaluation of this
- 105. information prior to move-in. Owner/Broker/Property Manager reserves the right to verify application information after move-in and may
- 106. convert the proposed Lease Agreement to a month-to-month term or declare the lease irreparably breached and seek immediate eviction
- 107. if false or misleading information is contained in this Application. Applicant agrees to the terms of this Deposit to Hold Agreement. This
- 108. application is preliminary only and does not obligate owner or owner's representatives to execute a lease or deliver possession of the
- 109. proposed Property. Owner/Broker/Property Manager comply with federal, state and local fair housing laws and regulations.
- 110. Unless otherwise agreed, I understand that the Brokerage, its Broker, its Agents, and employees are agents of and
- 111. represent the Owner in leasing this property.
- 112. \_\_\_\_\_

(Applicant's Initials Required) \_\_\_\_\_  
APPLICANT

- 113. By signing below, I acknowledge and accept the qualifying criteria and policies of the Owner/Broker/Property Manager by which my
- 114. application will be approved.
- 115. This application must be signed by applicant.

116. \_\_\_\_\_  
 ^ APPLICANT SIGNATURE MO/DAYR

117. **FALSIFYING INFORMATION ON THIS APPLICATION IS GROUNDS FOR REJECTION.**

**FOR OFFICE USE ONLY**

- 118. Agent Name: \_\_\_\_\_
- 119. Co-Broke?  Yes  No Exclusive?  Yes  No
- 120. Referred by: \_\_\_\_\_ At: \_\_\_\_\_
- 121.  ACCEPTED Date of Written Notification: \_\_\_\_\_
- 122.  REJECTED Date Denial Letter Was Sent: \_\_\_\_\_
- 123. NOTES: \_\_\_\_\_
- 124. \_\_\_\_\_

