### **Gratz Rentals**

5718 Wardsville Rd.
Jefferson City, MO 65101
(573) 635-4168

FAX: (573) 634-8832

E-MAIL: info@callgratz.com

# \$20 APPLICATION FEE PER PERSON

PLEASE BE ADVISED THAT IF YOU LEAVE ANY SPACES BLANK AND DO NOT FILL OUT THIS APPLICATION IN ITS ENTIRETY, YOUR APPLICATION WILL NOT BE CONSIDERED NOR SENT TO THE CREDIT DEPARTMENT.

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#### RENTAL APPLICATION Equal Housing Opportunity

Please review your application before submitting it for processing. Check to make sure we have complete information and phone numbers so we may expedite your application quickly. Incomplete applications will delay processing. Owner/Manager may require additional information.

The application fee is \$20 per adult/applicant (non-refundable). Please submit a money order or cash with your application to Gratz Rentals at the address above.

The undersigned is applying to rent unit #	located at	
beginning on		
\$ Anticipated move in date of _		
Do you have any pets? Yes No		
APPLICANT- PLEASE TELL US ABOUT YOU	RSELF	
Full Name	Home Phone_(	) .
Date of Birth	Social Security	#
Email Address	Other Phone (	) .
APPLICANT- PLEASE GIVE RESIDENTIAL HI	STORY (past 3 years, list curre	nt first)
Current Address	Apt. # City	State Zip .
Month & year moved in	Reason for leaving	
Rent \$Landlord/ Agent	Phor	ne_( )
Dates of living there	Reason for leaving	
Landlord/ Agent	Phon	e( )

## APPLICANT- PLEASE GIVE YOUR EMPLOYMENT INFORMATION ( ) Student ( ) Unemployed ) Full Time ( ) Part Time Your status Employer / School Employed as \_\_\_\_\_\_. Dates employed Supervisor name Phone ( ) . Salary \$\_\_\_\_\_per\_\_\_\_\_. Previous employer Dates employed Employed as \_\_\_\_\_\_. Supervisor name Phone ( ) If there are any other sources of income you would like us to consider, please list income, source and person (banker, employer, or etc) who we could contact for confirmation. You do not have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in this application. Amount \$\_\_\_\_\_Source Name \_\_\_\_\_Source Phone ( )\_\_\_\_\_. Other annual income \$\_\_\_\_\_\_Source Name\_\_\_\_\_Source Phone ( )\_\_\_\_\_ APPLICANT- PLEASE LIST YOUR REFERENCES Address Phone ( ) Relationship . Your driver's license number\_\_\_\_\_\_\_Vehicle make / model\_\_\_\_\_\_ Vehicle year \_\_\_\_\_License Plate \_\_\_\_\_State \_\_\_\_. APPLICANT- HAVE YOU EVER ( ) NO ) YES FILED FOR BANKRUPTCY? ) NO BEEN EVICTED FROM TENANCY OR BEEN IN FORCLUSURE? ) YES ) YES WILLFULLY OR INTENTIONALLY REFUSED TO PAY RENT WHEN DUE? ) NO

Please give any additional information that might help the owner/management evaluate this

application:

#### **CONTACT INFORMATION FOR APPLICATION RESULTS**

Cell Phone ( ) Other Phone (	Email		
CO-APPLICANT- PLEASE TELL US ABOUT YOURSELF			
	Home Phone ( )		
Date of Birth	Social Security #		
	Other Phone ( )		
CO-APPLICANT- PLEASE GIVE RESIDENTIAL HISTOR	Y (past 3 years, list current first)		
Current AddressA	pt. #CityStateZip		
Month & year moved inReason	for leaving		
Rent \$Landlord/ Agent	Phone_(		
Dates of living there Reason	n for leaving		
Landlord/ Agent	Phone ( )		
CO-APPLICANT- PLEASE GIVE YOUR EMPLOYMENT	INFORMATION		
Your status ( ) Full Time ( ) Part 7	Γime ( ) Student ( ) Unemployed		
Employer / School	<u> </u>		
Dates employed	Employed as		
Supervisor name	Phone ( ) .		
Salary \$per			
Previous employer			
Dates employed	Employed as		
Supervisor name	Phone ( )		
If there are any other sources of income you would person (banker, employer, or etc) who we could could alimony, child support, or spouse's annual income to Amount \$Source Name	ntact for confirmation. You do not have to reveal		
Other annual income \$Source Name	Source Phone ( )		
CO-APPLICANT- PLEASE LIST YOUR REFERENCES			
Personal Reference or Emergency Contact Name			
Address	Phone ( ) Relationship		
Your driver's license number	Vehicle make / model		

Vehicle year	License Plate			State	<u> </u>	
CO-APPLICANT- HAVE YO	DU EVER					
FILED FOR BANKRUPTCY	?	(	) NO	(	) YES	
BEEN EVICTED FROM TEI	NANCY OR BEEN IN FORCLUSURE?	(	) NO	(	) YES	
WILLFULLY OR INTENTIO	NALLY REFUSED TO PAY RENT WHEN DUE?	(	) NO	(	) YES	
- ,	al information that might help the owner/m	_		uate <u>this</u>		
					<u>-</u>	
CONTACT INFORMATION	N FOR APPLICATION RESULTS					
Cell Phone ( ) Other Phone ( )			Email			
NAMES OF DEPENDENTS	3					
Name	Birthdate				à.	
Name	Birthdate				<u>.</u>	
Name	Birthdate				•	
Name	Birthdate					
	se the above described premises for the terr e that the rental is to be payable for the first ements above are true.					
	AUTHORIZATION					
	Release of Information investigation of my credit, tenant history, bapartment, and for the building owner/ man I close out information.					
Applicant name (please p	print):					
Applicant signature:			Date:			
Co-Applicant Name (plea	se print)	_				
Co-Applicant Signature:			Date:			

# NOTE TO APPLICANT YOU ARE REQUIRED TO SIGN THE NEXT PAGE

This next page is for Gratz Rentals to send to your employer or current landlord for a reference. If you could please give YOUR address, print YOUR name and sign YOUR name so the reference has approval to speak with us.

Thank you

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#### To Whom It May Concern:

The following person has applied for tenancy in our building, and we are requesting a reference from your company. Please indicate the rent rate, length of time with your company, and your views on the person as a renter.

person as a renter.	
Thank you,	
Gratz Real Estate	
	· Address
	Name
	Signature
	Address

Signature \_\_\_\_\_