

**RESIDENTIAL RENTAL APPLICATION**

**Landlord**

Landlord Name: Greenglen Apartments LLC  
Address: 1805 Dogwood Ridge Rd, Wheelersburg, OH 45694  
Phone: 740-574-8520

**Rental Property Information**

Rental Property Address: 1805 Dogwood Ridge Rd  
Application to rent suite # \_\_\_\_\_  
Anticipated Possession Date: \_\_\_\_\_, \_\_\_\_\_  
The term of the tenancy will be

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The monthly rent will be \$ \_\_\_\_\_.  
Security Deposit: \_\_\_\_\_.

**Applicants' Personal Information**

Applicant's Name: \_\_\_\_\_  
Home Phone: (     ) \_\_\_\_\_ Alternative Phone: (     ) \_\_\_\_\_  
Email Address (Optional): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Second Applicant's Name: \_\_\_\_\_  
Second Applicant's Date of Birth: \_\_\_\_\_

Third Applicant's Name: \_\_\_\_\_  
Third Applicant's Date of Birth: \_\_\_\_\_

Dependants Name(s):	Date(s) of Birth
_____	_____
_____	_____
_____	_____
_____	_____

Do you have a pet?    Yes / No    If more than one, how many? \_\_\_\_\_  
Please describe type(s) of pet(s):

\_\_\_\_\_

---

**Residential History**

Present Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

Previous Address 1: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

Previous Address 2: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

ZIP Code: \_\_\_\_\_ How long at this address? \_\_\_\_\_

Landlord / Lessor: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

**Details of Employment**

Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

Salary: \_\_\_\_\_

(If employed less than one year with present employer, please provide previous employer.)

Previous Employer: \_\_\_\_\_

Position: \_\_\_\_\_ Date Hired: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Phone: ( \_\_\_\_\_ )

Salary: \_\_\_\_\_

**Other Sources of Income**

Do you receive income from any of the following sources? Yes / No

Student Loans \_\_\_\_\_ Pension Benefits \_\_\_\_\_ Social Assistance \_\_\_\_\_ Other \_\_\_\_\_

Please provide contact persons who could verify the amount of income you receive:

\_\_\_\_\_  
\_\_\_\_\_

**Vehicle Information**

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Make / Model: \_\_\_\_\_ Year: \_\_\_\_\_

License Plate Number: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_

Parking stall required? Yes / No    Additional stall required? Yes / No (Subject to availability)

**Banking Information**

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Phone: (    ) \_\_\_\_\_

(If you bank with more than one institution, please list second bank below)

Banking Institution: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**References**

Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**Emergency Contact**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Phone: (    ) \_\_\_\_\_

**Criminal & Credit Background Check Authorization**

Is there anything negative that we may find in our criminal or credit background check that you want to comment on?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

