



7243 N Western Ave, Chicago, IL, 60645 | Tel: 773-856-0707 | Fax: 773-856-0553 | www.cityhabitatichicago.com

RENTAL APPLICATION

(Each adult - 18 or older - must fill out a separate application; there is a non-refundable fee of \$65/applicant)

Date _____ Security Deposit/Move-In Fee _____ Move In Date _____

Property Address _____ Unit #: _____ Rent: \$ _____

APPLICANT:

E-mail Address: (please type or print) _____

FIRST NAME _____ LAST NAME _____ Date Of Birth _____

Driver License # _____ Social Security # _____ Phone # _____

Address: _____ City: _____ State: _____ Zip code: _____

How Long _____ Current Rent _____ Lease Expires _____ Reason of moving _____

Present Landlord Address: _____

Phone # _____ Contact: _____

Previous Address (If less than 2 years) _____

Previous Landlord Address _____ Phone Number _____

OTHER PERSON(S) TO OCCUPY THE APARTMENT:

Name _____ Relationship _____

Name _____ Relationship _____

Name _____ Relationship _____

EMPLOYMENT HISTORY:

Current Employer _____ Monthly Salary _____ Title/position _____

From/to _____ Address: _____

Supervisor/Manager/HR: _____ Phone#: _____

Previous Employer _____ Title/position _____ From/to _____

Supervisor/Manager/HR: _____ Phone#: _____

If you have other sources of income that you would like us to consider, please list income, source and person (banker, employer etc) who we may contact for information:

CREDIT HISTORY:

Have you declared bankruptcy in the past 7 years? YES _____ NO _____

Have you ever been evicted from a rental residence? YES _____ NO _____

Have you had two or more late rental payments in the past year? YES _____ NO _____

REFERENCES:

Name _____ Relationship _____ Phone Number _____

Name _____ Relationship _____ Phone Number _____

EMERGENCY CONTACT:

Name _____ Relationship _____ Phone Number _____

ADDITIONAL INFORMATION: *(Please give any additional information that might help owner/management to evaluate this application):*

I certify that all of the information in this application is true and correct. I hereby apply for and offer to lease the apartment described for the lease term stated, at the rent and conditions set forth herein and in Lessor' standard lease form.

I understand that no pets are allowed without prior written approval.

I understand that, as is customary business, in compliance with the Fair Credit Reporting Act, routine inquiries may be made concerning my tenancy. An investigative or credit report will be made which include information as to my character, general reputation, personal characteristics and mode of living. The investigation may include information obtained through personal interviews concerning marital status, number of children, employment, occupation, general health, habits, reputation, mode of living and residence verification. I understand that any discrepancy or lack of information may result in the rejection of this application.

The deposit is not refundable unless this application is rejected by Lessor for any reason. If the application is accepted, applicant forfeits all rights to deposit and understands and agrees that agent will retain deposit as fixed and liquidated damages. NO EXCEPTIONS.

I understand that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. I further understand that there is a **non-refundable** fee to cover the cost of processing my application and I am not entitled to a refund even if I don't get the apartment. Any questions regarding rejected applications must be submitted in writing and accompanied by a self-addressed stamped envelope or via email to **info@cityhabitatchicago.com**.

Applicant 's Signature

Date

FOR OFFICE USE ONLY:

Received by _____ Date _____

Processing Fee: Money Order ☐ Cashier's Check ☐



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I _____ hereby authorize "City Habitat" to debit my

_____ VISA _____ MASTERCARD _____ DISCOVER

Credit Card Number: _____

Expiration Date: _____

CVV CODE: _____ *(located on the back of your card)*

In the amount of \$_____ For the following Service:

My billing address for this card is:

City _____ State _____ Zip _____

Phone _____

Cardholder signature _____ Date _____