



1021 S. Howard St ~ Fremont, NE 68025
(402) 721-4283 (402) 753-9947 fax

RENTAL APPLICATION

Application approval for our properties is based on a record of good credit, ability to pay based on our Company guidelines and a positive, verifiable rental history.

PLEASE ATTACH A COPY OF • EACH APPLICANT'S DRIVER'S LICENSE OR OTHER GOVERNMENT ISSUED I.D. • \$20 APPLICATION FEE PAYABLE TO: CLP

Office Use Only:

Date Submitted	Time Submitted	Application Fee Collected – Amount
Driver's License Copy	<input type="checkbox"/>	Approved? <input type="checkbox"/> Denied? <input type="checkbox"/>
Credit Check	<input type="checkbox"/>	Date Denial Letter Sent
Background Check	<input type="checkbox"/>	Apt #
Rental History Check	<input type="checkbox"/>	Move In Date
Employment Verification	<input type="checkbox"/>	Wall Color

Referral? Y N If yes – name and apt # of referral:

How did you hear about us? _____

PLEASE INDICATE WHICH APPLIES

I would like a/an: Twelve (12) Month Lease *or* Eighteen (18) Month Lease

I am applying for: **Deerfield Clubhouse** | **Conestoga Crossing**

I would like a: 1 2 3 Bedroom | 2 Bedroom Only

I prefer: Ground Floor Upper Level | End Unit No Preference

Garage?: Yes No | Yes No

NOTE: Due to availability, we may not be able to accommodate your preference.

Approximate Move In Date: _____

PLEASE TELL US ABOUT YOURSELF (DETAILS NECESSARY FOR CREDIT VERIFICATION)

(All applicants 19 years and older must complete an application, attach additional forms if necessary)

FULL NAME _____ Phone () _____

Date of Birth _____ SS# ____ / ____ / _____ Government ID # & State _____

E-Mail Address(s) _____

*Will anyone other than listed above occupy the premises with you? (Maximum of 2 persons per bedroom)
If over the age of 19, please provide SS# for background check*

Name _____ Relationship _____ Age _____ SS# ____ / ____ / _____

Name _____ Relationship _____ Age _____ SS# ____ / ____ / _____

Name _____ Relationship _____ Age _____ SS# ____ / ____ / _____

RESIDENCE HISTORY FOR THE PAST 3 YEARS (DETAILS NECESSARY TO COMPLETE LANDLORD VERIFICATION)

(Attach additional pages, if necessary)

CURRENT ADDRESS _____ CITY, ST ZIP _____

Landlord _____ Phone () _____ Monthly Payment \$ _____

Month & Year Moved In _____ Reason for Leaving _____

PREVIOUS ADDRESS _____ CITY, ST ZIP _____

Landlord _____ Phone () _____ Monthly Payment \$ _____

Month & Year Moved In _____ Reason for Leaving _____

BANK AND PERSONAL REFERENCES

YOUR BANK	City-State or Branch	Account Type	Telephone
1 _____	_____	_____	_____
2 _____	_____	_____	_____

YOUR PERSONAL REFERENCES	Relationship To You	Telephone
1 _____	_____	_____
2 _____	_____	_____

EMPLOYMENT INFORMATION (DETAILS NECESSARY TO COMPLETE EMPLOYMENT VERIFICATION)

CURRENT EMPLOYER _____

Address _____ Phone () _____

Date Employed / From _____ To _____ Position _____

Supervisor _____ Your Monthly Salary Before Taxes \$ _____

Other Income? (Sources) _____ Amount \$ _____

VEHICLES: (maximum of 2)

Make/Model _____	Year _____	Color _____	Tag No./State _____
Make/Model _____	Year _____	Color _____	Tag No./State _____

PLEASE ANSWER YES OR NO:

	Applicant	Co-Applicant
1. Have you EVER declared bankruptcy?	_____	_____
2. Have you EVER been evicted?	_____	_____
3. Do you have any collection accounts/judgments?	_____	_____
4. Have you EVER broken a Rental Agreement or Lease?	_____	_____
5. Have you EVER been sued for damage to a rental property?	_____	_____
6. Have you EVER been convicted of a felony?	_____	_____
7. Do you have a pet?	_____	_____
8. Do you have a home based business?	_____	_____
9. Does anyone in your household smoke?	_____	_____

If Yes, to any of the above, explain _____

IN CASE OF EMERGENCY, NOTIFY:

Relationship: _____ Full Address: _____

Home Phone: _____ Work Phone: _____

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Relationship: _____ Full Address: _____

Home Phone: _____ Work Phone: _____

Landlord has the full authorization to obtain any information on applicant regarding employment, salary, rental history, credit, bank information and a criminal background check as needed by CHRISTENSEN CORPORATION and further shall be permitted to share rental information with a third party.

Signature: _____ **Date:** _____

Signature: _____ **Date:** _____