

ARKANSAS RESIDENTIAL RENTAL APPLICATION

(1 form per applicant)

THE PROPERTY

(TO BE COMPLETED BY LANDLORD)

Property Type: ☐ Apartment | ☐ Condominium | ☐ Home | ☐ Other: _____

Property Address: _____

Beds (#): _____ Baths (#): _____ Square Feet (SF): _____

Lease Type: ☐ Fixed term ☐ Periodic Lease Start Date: _____ (mm/dd/yyyy)

Pets allowed? ☐ Yes ☐ No Smoking allowed? ☐ Yes ☐ No Parking? ☐ Yes ☐ No

Monthly Rent: \$ _____ Application Fee: \$ _____

THE APPLICANT

Applicant's Full Name: _____ SSN: _____

Date of Birth: _____ (mm/dd/yyyy) Phone Number: _____

Email: _____

Photo ID: ☐ Driver's License ☐ Passport ☐ Other: _____

ID#: _____

Additional Occupant(s)? ☐ Yes ☐ No

If yes, describe: _____

Pet(s)? ☐ Yes ☐ No

If yes, describe: _____

CURRENT RESIDENCE

Property Type: ☐ Apartment | ☐ Condominium | ☐ Home | ☐ Other: _____

Property Address: _____

Monthly Rent (\$): _____ Beds (#): _____ Baths (#): _____ Square Feet (SF): _____

Lease Start: _____ (mm/dd/yyyy) Lease End: _____ (mm/dd/yyyy)

Reason for Moving: _____

Landlord Name: _____

Landlord Email: _____ Landlord Phone: _____

PREVIOUS RESIDENCE - 1

Property Type: ☐ Apartment | ☐ Condominium | ☐ Home | ☐ Other: _____

Property Address: _____

Monthly Rent (\$): _____ Beds (#): _____ Baths (#): _____ Square Feet (SF): _____

Lease Start: _____ (mm/dd/yyyy) Lease End: _____ (mm/dd/yyyy)

Reason for Moving: _____

Landlord Name: _____

Landlord Email: _____ Landlord Phone: _____

PREVIOUS RESIDENCE - 2

Property Type: ☐ Apartment | ☐ Condominium | ☐ Home | ☐ Other: _____

Property Address: _____

Monthly Rent (\$): _____ Beds (#): _____ Baths (#): _____ Square Feet (SF): _____

Lease Start: _____ (mm/dd/yyyy) Lease End: _____ (mm/dd/yyyy)

Reason for Moving: _____

Landlord Name: _____

Landlord Email: _____ Landlord Phone: _____

CURRENT EMPLOYER

Company Name: _____

Employer's Address: _____

Title / Occupation: _____

Gross Monthly Income: \$ _____ Start Date: _____ (mm/dd/yyyy)

Supervisor Name: _____

Supervisor Phone: _____ Supervisor Email: _____

PREVIOUS EMPLOYER

Company Name: _____

Employer's Address: _____

Title / Occupation: _____

Gross Monthly Income: \$ _____ For how long? _____ Months

Supervisor Name: _____

Supervisor Phone: _____ Supervisor Email: _____

VEHICLE(S)

Do you own a vehicle? ☐ Yes (describe below) ☐ No

Make: _____ Model: _____ Year: _____

Color: _____ Plate #: _____ State: _____

Do you own a second vehicle? ☐ Yes (describe below) ☐ No

Make: _____ Model: _____ Year: _____

Color: _____ Plate #: _____ State: _____

REFERENCES

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

Full Name: _____ Relationship: _____

Email: _____ Phone: _____

BACKGROUND INFORMATION

Have you ever been evicted or a defendant in an eviction action? ☐ Yes ☐ No

If yes, describe: _____

Have you ever filed, or are you in the process of filing bankruptcy? ☐ Yes ☐ No

If yes, describe: _____

Do you have any outstanding balances with past landlords? ☐ Yes ☐ No

If yes, describe: _____

Have you ever been asked to move for a lease violation of any kind? ☐ Yes ☐ No

If yes, describe: _____

Have you ever been convicted of a crime? ☐ Yes ☐ No

If yes, describe: _____

CONSENT & ACKNOWLEDGMENT

I hereby certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain an investigative consumer credit report including, but not limited to, credit history, OFAC search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, bank representatives, and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential. I hereby hold the Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742

These consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics, and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

Application Fee: \$ _____

Applicant's Signature: _____ **Date:** _____

Printed Name: _____