

KRK Realty, Inc.

Mailing & Physical: 2501 N. Hayden, Suite 101, Scottsdale, AZ 85257
 Office: 480-361-5202 Fax: 480-304-3310 E-mail: Kevin.Kirkwood@KrkRealty.com
 Residential Rental Application \$35 Fee each (\$60 total for two or more applicants)

CO-SIGNORS: Please complete page 1 and sign on page 2. Current residence and employment only.

Co-signor: ___ yes ___ no			
DESIRED PROPERTY ADDRESS		TODAY'S DATE	REASON FOR MOVING
PRINT FULL NAME		DATE OF BIRTH	SOCIAL SECURITY #
NAME OF SPOUSE		DATE OF BIRTH	SOCIAL SECURITY #
CURRENT ADDRESS	CITY, State	ZIP CODE	RENT / MORTGAGE PAYMENT
PRESENT PHONE NUMBER(S) Home: _____ Cell: _____ EMAIL: _____			
CURRENT LANDLORD / MORTGAGE	PHONE NUMBER	DATE MOVED IN	
ROOMMATE / ADDITIONAL OCCUPANTS			DESIRED MOVE-IN DATE

RESIDENCE (PROVIDE TWO YEAR'S OF HISTORY)

PREVIOUS ADDRESS #1	CITY	ZIP CODE	FROM	TO
NAME OF LANDLORD AND / OR OFFICE			PHONE NUMBER	
		Rent: _____		
PREVIOUS ADDRESS #2	CITY	ZIP CODE	FROM	TO
NAME OF LANDLORD AND / OR OFFICE			PHONE NUMBER	
		Rent: _____		
PREVIOUS ADDRESS #3	CITY	ZIP CODE	FROM	TO
NAME OF LANDLORD AND / OR OFFICE			PHONE NUMBER	
		Rent: _____		

EMPLOYMENT (PROVIDE TWO YEAR'S OF HISTORY)

CURRENT EMPLOYER	POSITION	INCOME/PER MONTH	DATE STARTED
BUSINESS ADDRESS		SUPERVISOR	PHONE NUMBER
EMPLOYER	POSITION	INCOME/PER MONTH	FROM TO
BUSINESS ADDRESS		SUPERVISOR	PHONE NUMBER
EMPLOYER	POSITION	INCOME/PER MONTH	FROM TO
BUSINESS ADDRESS		SUPERVISOR	PHONE NUMBER

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FINANCIAL

INCOME SOURCE OTHER THAN EMPLOYMENT (DESCRIBE)	MONTHLY AMOUNT	PHONE NUMBER TO VERIFY

OTHER

HAVE YOU (OR SPOUSE) EVER DECLARED BANKRUPTCY? YES _____ NO _____

HAVE YOU (OR SPOUSE) HAD A CREDIT CARD CHARGED OFF (OR DEBT FORGIVEN)? YES _____ NO _____

HAVE YOU (OR SPOUSE) EVER HAD A CAR REPOSSESSED? YES _____ NO _____

HAVE YOU (OR SPOUSE) EVER HAD AN ACCOUNT SENT TO COLLECTIONS OR CHARGED OFF? YES _____ NO _____

ARE YOU (OR SPOUSE) CURRENTLY INVOLVED IN A LAWSUIT OF ANY KIND? YES _____ NO _____

EMERGENCY CONTACT

NAME	RELATIONSHIP	ADDRESS	PHONE NUMBER

PETS

YES _____ NO _____ # _____	TYPE	WEIGHT	AGE

AUTOMOBILES

MAKE	YEAR	LICENSE # AND STATE
MAKE	YEAR	LICENSE # AND STATE
DRIVERS LICENSE #		STATE

Applicant understands that occupancy is limited to only those names on this application. Applicant acknowledges that all information listed on the application is true and accurate. Applicant hereby authorizes verification of all information including credit check and rental history by the management. Any false information listed shall constitute grounds for rejection of this application, termination of rental agreement and right of occupancy, and forfeiture of deposits. Applicant understands the processing fee for verifying this rental application is NOT REFUNDABLE.

Applicant's Signature _____ Date _____

Applicant's Signature _____ Date _____

Manager _____ Date _____