

Rosewood Rentals, LLC

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RENTAL APPLICATION

Today's Date: _____ Occupancy Date Desired: _____
Rental Price Range: _____ Type/Size Desired: _____
Rental Address Shown: _____

APPLICANT'S PERSONAL INFORMATION

Last Name: _____ First: _____ Middle: _____
Birthdate: _____ Driver's License/ID Number/State: _____
Social Security #: _____ Email address: _____

Additional Occupants (List every occupant name and their relationship below, including children)

Preferred Method of "Worry-Free" Standard Rental Payments:

Electronic Banking _____
Other method of payment which requires additional \$3 handling fee: Check ___ Money Order ___

Preferred Rental Due Date:

Old Fashion Method - Monthly ___ Pay Day Plan - Bi-Weekly ___ Other Alternative - Weekly ___

How long do you plan on living in the next rental home that meets your needs? _____

Would you like to purchase a home within the next 2 to 3 years? _____ If so, what size/type property would you like to buy? _____

Would you be interested in our Future Home Buyers Program to help you find and buy your first home?

Are you able to handle all the minor maintenance/upkeep in the property

Yes ___ No ___ Check the following items that you own -

Vacuum Cleaner ___ Mop ___ Broom ___ Plunger ___ Lawn Mower ___

Appliances (if so, which ones) _____

Please note: Residents who handle minor maintenance and repairs on the property and pass property inspections are eligible to receive credit to help purchase a future home (that's part of our future homeowners program).

Check all professional level skills possessed: Electrical ___ Painting ___ Plumbing ___

Roofing ___ Appliance repair ___ Air Conditioning ___ Heating ___ Carpentry ___

Do you have renter's insurance? _____ Do you have any water-filled furniture? _____

Have you ever broken a lease? _____ Have you ever refused to pay rent for any reason? _____

Have you ever been evicted or asked to leave a rental unit? _____ Ever filed for bankruptcy? _____

Ever been convicted of a crime ___ Will you give us permission to do a criminal background check? _____

Currently have any utilities in your name? _____ Currently have phone service in your name? _____

Is there anything to prevent you from placing utilities or phone in your name? _____

Do you know of anything or any reason which may interrupt your ability to pay rent? _____

RESIDENCE HISTORY

Present Street Address _____

City _____ State _____ Zip _____

Dates lived at this address? _____ Own ___ Rent ___ Occupy ___

Current Phone _____ How many pets did you have? ___ Type _____

Name of present landlord/owner/mortgage company: _____

Address of present landlord/mortgage company: _____

Landlord's phone: _____ Monthly payment: _____

Reason for moving: _____ Is your rent/mtg current? _____

Number of late payments? _____ Security Deposit Amount currently held by landlord? _____

Previous Residence Address: _____
Previous landlord: _____ Previous landlord's phone: _____
Dates at this address: _____ Reason for moving? _____
Was your Full Security Dep. Returned? _____ # of late payments? _____ Monthly payment? _____

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INCOME HISTORY

Applicant's current employment status:
Full-time _____ Part-time (less than 32hrs) _____ Student _____ Retired _____ Self-employed _____
Unemployed _____ Other _____

Primary source of employment:
Applicant employed by: _____ Supervisor's name: _____
Average Weekly hours: _____ How long at they place of employment? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Position: _____ Salary: _____
Please indicate Weekly, Bi-Weekly, Monthly, or Annual Average Take home: _____

Additional Employment
Employed by: _____ Supervisor's name: _____
Average Weekly hours: _____ How long at they place of employment? _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Position: _____ Salary: _____
Please indicate Weekly, Bi-Weekly, Monthly, or Annual Average Take home: _____

ADDITIONAL INCOME / PAYMENT INFORMATION

In the event of some emergency that would prevent you from paying rent when due, is there a relative, person, or agency that could assist you with rent payments?

1st Emergency Contact: _____
Relationship _____
Address _____
Phone# _____ 2nd Phone # _____

2nd Emergency Contact: _____
Relationship _____
Address _____
Phone# _____ 2nd Phone # _____

Do you currently have a savings account, line of credit, or charge card sufficient to cover one month's rent?

ADDITIONAL INCOME: (optional)

If there are additional, verifiable sources of income you would like considered, Please list income source (i.e., self-employment, social security, benefit payments, etc.), and requested information below regarding each source. Applicant may be required to produce additional documentation or provide and sign release statements. Child support, alimony, or separate maintenance need NOT be disclosed unless you desire this additional income to be considered for qualification.

Additional Source: _____ Amount:\$ _____ Per _____
Contact person: _____ Phone: _____
How long have you been receiving income from this source? _____ How long do you expect this income continue?
_____ Is there any reason it would stop? _____

Additional Source: _____ Amount:\$ _____ Per _____
Contact person: _____ Phone: _____

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_____ Is there any reason it would stop? _____

ASSETS / CREDITS / LOANS

Number of vehicles on property? _____ Valid registration & inspection? _____

Do you have any commercial vehicles, _____ RV, campers, boats or motorcycles? _____

Vehicle 1-make/model/color/year _____

Please note, only cars on application are authorized to be on premises.

Plate number _____ State _____

Financed/leased through _____

Contact and phone number _____

Acct. # _____ Monthly payment _____

Vehicle 2-make/model/color/year _____

Please note, only cars on application are authorized to be on premises.

Plate number _____ State _____

Financed/leased through _____

Contact and phone number _____

Acct. # _____ Monthly payment _____

CREDIT CARDS, LOANS (including banks, department store, gas cards, student loans)

Creditor: _____

Address _____

Phone: _____ Acct. #: _____

Total Amount owed: _____ Monthly payment: _____ Are your payments current? _____

Other Creditor: _____

Address _____

Phone: _____ Acct. #: _____

Total Amount owed: _____ Monthly payment: _____ Are your payments current? _____

List any other current monthly expenses?

Hospital payment _____ Health Insurance _____ Auto Insurance _____

Renter's Insurance _____ Child care _____ Tuition _____

Cable TV _____ Other _____ Amount _____

BANK REFERENCE

Name of bank and branch: _____ Phone: _____

Branch address: _____

Checking Acct. #: _____

Savings Acct#: _____

How long account active, (C) _____ (S) _____ Average monthly balance, (C) _____ (S) _____

PERSONAL/PROFESSIONAL REFERENCES

Character/Personal reference:

Name _____

Address _____

City _____ State _____ Zip _____

Relationship? _____ How long? _____ Phone _____

Professional reference (i.e. attorney, accountant):

Name _____

Address _____

City _____ State _____ Zip _____

Relationship? _____ How long? _____ Phone _____

Name of Nearest Living Relative:

Name _____

Address _____

City _____ State _____ Zip _____

Relationship? _____ How long? _____ Phone _____

Name of Doctor or Health Care Provider:

Name _____

Address _____

City _____ State _____ Zip _____

Relationship? _____ How long? _____ Phone _____

Do you give owner or manager permission to contact references listed above both now and in the future for rental consideration or for collection purposes should they be deemed necessary? _____

If Management has a question regarding this application, please furnish the best contact phone number:

Day phone/contact person: _____

Night phone/contact person: _____

THANK YOU!

Thank you for completing an application to rent from us. Please sign below. Please note that a completed application requires submission of the following which will be copied and attached to this application:

Driver's License or Sheriff's picture ID. Note: rentals will not be shown without picture ID

Personal check (to verify bank) 2 weeks of most current pay stubs of each income source listed

If self-employed, most current Schedule C tax return and proof of current income

A fee of **\$25.00** (\$10 for each additional applicant) is charged on all rental applicants for the purpose of verifying the information furnished on this application. By signing below, applicant hereby represents all information on this application is true, complete, and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that become necessary. This fee is only refundable if applicant meets our minimal criteria but is not selected because they were not the first qualified applicant. Selected applicants will receive a credit equal to the application fee that will be applied to the first month's rent.

Applicant acknowledges this application will become part of the lease agreement when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and misleading statements will be sufficient reason for immediate eviction and loss of security deposit.

FREE UPGRADE BONUS

Final note: Our company offer a free upgrade for residents who recommend friends, relatives or co-workers to us and they meet our minimum criteria and decide to rent from us or be placed on our priority waiting list. If your application is accepted, you may be able to qualify for a free upgrade in your new residence. Please give the name of a friend, relative or co-worker along with a phone number and we will contact them to see if they too would like to apply and rent one of our homes. The following person(s) may be interested in renting a home:

_____ Phone _____

_____ Phone _____

Applicant's signature: _____ Date: _____