

**SOUTHWARD RENTALS
RENTAL APPLICATION**

Application Date: ___/___/___	When do you need the rental?	How long do you want on a waiting list?
Are you applying for a: (please checkmark)		
1 bedroom	2 bedroom	Duplex Long St. Home Powell St. Home
APPLICANT INFORMATION		
LEGAL NAME OF APPLICANT – FIRST	Last	MIDDLE
CURRENT ADDRESS		CITY
DATE OF BIRTH	OCCUPATION – Full or Part Time	YEARLY INCOME
EMPLOYER		EMPLOYER ADDRESS
HOW LONG ON JOB	EMPLOYER CONTACT NUMBER	IN CASE OF EMERGENCY NOTIFY
CURRENT LANDLORD	LANDLORD PHONE	YEARS WITH LANDLORD
CURRENT RENT	AUTO LIC PLATE	LEASE EXPIRATION DATE
CO - APPLICANT INFORMATION		
NAME OF CO APPLICANT – FIRST	Last	MIDDLE
CURRENT ADDRESS		CITY
DATE OF BIRTH	OCCUPATION	YEARLY INCOME
EMPLOYER		EMPLOYER ADDRESS
HOW LONG ON JOB	EMPLOYER CONTACT NUMBER	IN CASE OF EMERGENCY NOTIFY
CURRENT LANDLORD	LANDLORD PHONE	YEARS WITH LANDLORD
CURRENT RENT:	AUTO LIC PLATE	LEASE EXPIRATION DATE
LIST NAMES OF PERSONS WHO WILL BE LIVING IN THE RENTAL		
1.	Date of Birth:	3.
2.	Date of Birth:	4.
Do you or anyone that will be living in the rental smoke? <input type="checkbox"/> Please Checkmark <input type="checkbox"/> Yes <input type="checkbox"/> No		
APPLICANT'S REFERENCES (OTHER THAN RELATIVES)		
	NAME	ADDRESS
1.		PHONE
2.		
3.		
CO-APPLICANTS REFERENCES (OTHER THAN RELATIVES)		
1.		
2.		
3.		
LIST LANDLORDS YOU HAVE HAD IN THE PAST FIVE (5) YEARS AND THEIR TELEPHONE NUMBERS		
	NAME	PHONE

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**AUTHORIZATION
Release of Information**

I authorize an investigation of my credit, tenant history, banking and employment for the purposes of renting an apartment from Southward Rentals.

Name (please print)

Signature

Date

Co – Applicant Name (please print)

Co – Applicant Signature

Date

Prior to Move in the Following is Required:

Deposit _____

1st Month's Rent _____

Water Deposit _____

TOTAL DUE PRIOR TO MOVE IN: _____

Mail/Email Completed Applications back to:

Southward Rentals

161 West Main Street – Apt. S

Ashville, Ohio 43103

southwardrentals5@gmail.com