

**SHAWNEE PROPERTIES**  
2350 N COLE ST • LIMA, OHIO 45801  
PHONE: 419-222-9367

Please fax application to 419-224-6121

**APPLICANT INFORMATION**  
PLEASE PRINT CLEARLY

\_\_\_\_\_  
*Address You Are Applying For*

Today's Date: \_\_\_\_\_

Applicant: \_\_\_\_\_  
*First Middle Last*

**Employment/Income**

Employer: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Position: \_\_\_\_\_ Pay Rate: \$ \_\_\_\_\_

How Are You Paid? (circle)    Hourly    Bi-Weekly    Monthly

Length of Employment: \_\_\_\_\_ Average Hours: \_\_\_\_\_

**Other Residents**      *Name*      *Social Security Number*      *Date of Birth*

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Rental History**

Current Landlord: \_\_\_\_\_ Phone : \_\_\_\_\_

Current Rent Amount: \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Rent Amount: \_\_\_\_\_

Previous Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Years: \_\_\_\_\_ Months: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

**Personal References**

*Phone*

*Address*

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Other than spouse of co-applicant, in case of an emergency call:

\_\_\_\_\_

*Name* *Phone*

\_\_\_\_\_

*Address*

License Number: \_\_\_\_\_ State: \_\_\_\_\_

Auto Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Have you ever been arrested?: \_\_\_\_\_ When?: \_\_\_\_\_ Where?: \_\_\_\_\_

Explain: \_\_\_\_\_

Have you ever been evicted?: \_\_\_\_\_ When?: \_\_\_\_\_ Where?: \_\_\_\_\_

Have you ever filed bankruptcy?: \_\_\_\_\_ When?: \_\_\_\_\_ Where?: \_\_\_\_\_

If you are accepted, when will you be able to move in?: \_\_\_\_\_

Will you be able to pay your security deposit on the day you are accepted?: \_\_\_\_\_

***Utilities must be put into your name prior to taking possession.***

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, AND I AUTHORIZE SHAWNEE PROPERTIES AND ITS THIRD PARTY AGENCY TO ACCESS MY (OUR) CREDIT FILE(S)

Applicant's Signature: \_\_\_\_\_

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**STANDARD RELEASE FORM**

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*Address of Rental You Are Applying For*

I hereby authorize the release to **Shawnee Properties** information as needed concerning my employment, law enforcement involvement/contact, past and present housing and credit history. This release is to include all federal, state, county and local agencies as well as all credit reporting agencies.

I understand that **Shawnee Properties** intends to use this information as part of the screening process related to the renting or leasing or purchasing process and shall not be disclosed to any unnecessary parties.

*Please Print*

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

SOCIAL SECURITY NO.: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

YOUR CURRENT ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ DRIVER'S LICENSE #: \_\_\_\_\_

CELL PHONE NUMBER : \_\_\_\_\_

YOUR AGE TODAY: \_\_\_\_\_

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*Signature*

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*Date*

*For Office Use Only:*

CIVIL: \_\_\_\_\_

CRIMINAL: \_\_\_\_\_ CBT: \_\_\_\_\_