Hall Enterprises

Property Management Company

RENTAL APPLICATION

PERSONAL INFORMATION

Applicant's Full Name:_____
LAST FIRST MIDDLE

Birth Date:_____ Social Security #:_____

Driver's License #:_____ Cell Phone #:_____

Current Employer:_____ Start Date:_____

Employer's Address:_____ Phone:_____

Gross Salary:$_____ WEEKLY or MONTHLY (circle one)

Previous Employer:_____ Dates:_____

Employer's Address:_____ Phone:_____

Gross Salary:$_____ WEEKLY or MONTHLY (circle one)

Must provide 2 check stubs from the last 60 days

RESIDENCE AND PERSONAL HISTORY

Current Address:_____

Current Landlord:_____

Amount of Rent:$_____Current Landlord Phone #_____

Applicant's Credit Report (What will it show?):_____

_____

Applicant's Police Record (What will it show?):_____

_____

Evictions: Are you, any applicants, or other residents being evicted or have been evicted from a previous residence? YES NO (circle one) If yes, please explain:_____

_____

Banking Information

Checking Account #:_____ Bank:_____ Balance:_____

Savings Account #:_____ Bank:_____ Balance:_____

Hall Enterprises – 411 South Lincoln Dr. Troy, MO 63379
halltrailersales@gmail.com PHONE (636) 528-7090 FAX (636) 775-2670

PERSONAL INFORMATION

2nd Applicant's Full Name:_____
LAST FIRST MIDDLE

Birth Date:_____ Social Security #:_____

Driver's License #:_____ Cell Phone #:_____

Current Employer:_____ Start Date:_____

Employer's Address:_____ Phone:_____

Gross Salary:$_____ WEEKLY or MONTHLY (circle one)

Previous Employer:_____ Dates:_____

Employer's Address:_____ Phone:_____

Gross Salary:$_____ WEEKLY or MONTHLY (circle one)
Must provide 2 check stubs from the last 60 days

RESIDENCE AND PERSONAL HISTORY

Current Address:_____

Current Landlord:_____

Amount of Rent:$_____Current Landlord Phone #_____

2nd Applicant's Credit Report (What will it show?):_____

_____

2nd Applicant's Police Record (What will it show?):_____

_____

Evictions: Are you, any applicants, or other residents being evicted or have been evicted from a previous residence? YES NO (circle one) If yes, please explain:_____

_____

Banking Information
Checking Account #:_____ Bank:_____ Balance:_____

Savings Account #:_____ Bank:_____ Balance:_____

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OTHER RESIDENTS LIVING IN HOME

Name	***Relationship***	***Age***	***Date of birth***	***Social Security #***

DOES ANYONE LISTED ON THIS APPLICATION SMOKE? YES NO (circle one)

ADDITIONAL INFORMATION

Alternate/Emergency Contact:_____ Relationship:_____

Address:_____ Phone#:_____

Number of vehicles (including company cars):_____

MAKE	MODEL	COLOR	YEAR	LICENSE PLATE #	STATE

I/we certify the above and foregoing information is true. I/we acknowledge and agree that any material false statement made on the application will be grounds for termination of any subsequent lease. I hereby make application for a rental home and certify that this information is correct. I authorize you to contact references that I have listed to verify employment history, rental history, dates, income, banking information and any other information listed within this application.

Applicant's Signature:_____ Date:_____

2nd Applicant's Signature:_____ Date:_____

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