Clarke Location Service

602-577-1900 | info@clarkelocationservice.com 5115 N Dysart Road Suite 202-481, Litchfield Park, AZ 85340 www.clarkelocationservice.com

Address of desired property:			Date:				
To guarantee compliance with the dependent children) who will resi	e Federal Fair Housing Acts, informati de at the property.	on is required for ea	ach applic	ant over the	age of eighte	en (excludin	
	PLEASE 1	PRINT					
Applicant's Full Name:	Social Security #:						
Date of Birth:	Driver's License #:		State:	Zip:			
Home Phone #:	Work Phone #:	Cell #:		e-mail:			
Employer:			Phone #:				
Address:	City:	State:		Zip:			
Hire Date:	Positio	n:					
Gross monthly pay: \$	Hours per week:	Supervi	isor:				
Co-Applicant's Full Name:			Social So	ecurity #:			
Date of Birth:	Driver's License #:	State:		Zip:			
Home Phone #:	Work Phone #:			Cell #:			
Employer:	Phone #:						
Address:	City:	Sta	te:	Zig);		
Hire Date:	Positio	n:					
Gross monthly pay: \$	Hours per week:	Superv	isor:				
	ADDRESS H	<u>IISTORY</u>					
Current Address:		City:		State:	Zip:		
Move-in date:	Move-out Date:		Rent \$:				
Why Moving?							
Landlord:		Phone #	# :				
Previous Address:	City: State: Zip:						
Move-in date:	Move-out Date:		Rent \$:		<u> </u>		
Why Moved?							
Landlord:		Phone #	<u>.</u>				
		1 110116 7	• •				

Hours per week:

Supervisor:

Gross monthly pay: \$

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OTHER INCOME YOU WOULD LIKE US TO CONSIDER

(For example: Spousal support, child support, disability, social security, self employment etc...)

1. Source:			Gross amount per mo	onth: \$
2. Source:			Gross amount per mo	onth: \$
LIST TW	VO (2) PERSONAL REF	FERENCES TO CONT	TACT IN CASE OF EMERO	<u>GENCY</u>
Name:			Relationships:	
Address:			Phone:	
Name:			Relationships:	
Address:			Phone:	
	LIS	T ALL VEHICLES O	WNED	
Year Make (i	e. Ford/Chevy)	Model	State / License #	
		NO TO THE FOLLO	WING QUESTIONS: ant & Co-Applicant.)	
	take on the burden of hor make the monthly payme		g maintenance and repairs?	
3. Will you have the ent	tire down payment availal		on the 1st of the month:	
	evicted from a property? uptcy in the last 7 years?			
6. Have you ever been f	oreclosed upon in the last	t 7 years?		
LIST ALL NAM	MES AND AGES OF TH	IE INDIVIDUALS TH	AT WILL RESIDE IN THE	PROPERTY
1.		2.		
3.		4.		
<u>5</u> .		6.		
pay stubs showing c and 2 months bank s Applicant agrees that reporting service or of application is true. Ap eviction/forfeiture. App references, and any oth	urrent and year-to-date statements. Application all credit information matther persons who reques policant understands that olicant authorizes present the person to release information.	te totals; SSI or disals submitted without aintained by Clarke Lost it. Applicant hereby tany false answers of and past landlords a mation regarding applications.	ust attach proof of income bility award letters; if self-verification of income will ocation Service, LLC. may be y certifies that the informater statements made will be send Employers, Banks, Credit cants credit, rental and employers timely and accurate response	e given to any credit tion supplied in this sufficient grounds for t references, personal byment history.
Applicant Signature	Date	Co-A _I	pplicant Signature	Date

NOTE: APPLICATIONS WILL NOT be accepted on a "FIRST-COME, FIRST-SERVED BASIS." THIS PROPERTY IS MANAGED BY A PRINCIPAL REPRESNTING HIS INTEREST AND/OR OF THE OWNER OF THE REAL PROPERTY. THE CORPORATION WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMIAL STATUS, MARITAL STATUS, HANDICAP, OR ANCESTRY.