

HIGHRIDGE COURT APARTMENTS
921 HIGHRIDGE ROAD
CARROLL, IOWA 51401

Rental Application

Date: _____ Remote Deposit \$100.00 per garage = \$ _____
Security Deposit \$ _____

Apartment Number: _____ Rental Price: _____

This application and the content hereof are deemed a part of my lease.

Applicant's Name: _____ Tel. #: _____

Date of Birth: _____ Social Security: _____

Present Address: _____

Present Landlord: _____
Street City State Zip Telephone #: _____

Previous Address: _____

Previous Landlord: _____
Street City State Zip Telephone #: _____

Married: Yes _____ No: _____ Spouse's Name _____

Spouse's Date of Birth _____ Social Security #: _____

Total Number of Occupants: _____ Name and ages of Children: _____

Applicant's Employer: _____ Telephone # _____

Address: _____

Dates of Employed: From _____ To _____ Title/Position _____

Name of Superior: _____ Telephone #: _____ Annual Salary _____

Previous Employer: _____ Telephone #: _____

Address: _____ Dates Employed: _____ Supervisor _____

Spouse's Employer: _____ Telephone #: _____

Address: _____ Dates Employed: _____

Title/position: _____ Supervisor: _____ Annual Salary: _____

No smoking allowed in Apts. _____ Water Bed: Yes _____ No _____ If yes, Name if insurance company _____

Of Autos in Family: License# Make Year Color

1 Automobile _____

2 Automobile _____

Credit Reference: Name Address

Bank: _____

Credit Card: _____

Credit Card: _____

Personal References: (No Relatives) Name: _____ Address: _____

Name: _____ Address: _____

In Emergency Notify: Name: _____ Telephone #: _____

APPLICATION FEE \$ 20.00 (NON-REFUNDABLE)

I hereby make application for an apartment and certify that the above information is correct. I authorize the HIGHRIDGE CRT. APTS. To verify the above information through a consumer reporting agency. This agency is Tenant Data Services, Inc. (402)-476-3181. The function of this agency is to track and maintain records, such as your resident conduct and personal credit history. Tenant Data Services, Inc. will also obtain a credit report on all applicants.

Signature Applicant: _____ Date: _____

Spouse: _____ Date: _____

**** SECURITY DEPOSIT NON – REFUNDABLE AFTER THREE DAYS

Addendum To Application

For _____
Applicant Name and Social Security Number

I hereby authorize the Landlord or Landlord's agents to verify the information on the application. Verification or re-verification of any information contained in the application will be retained by Landlord. I hereby authorize Tenant Data Services Inc. and/or the Landlord/Landlord's agents to obtain information about me, including, but not limited to this application, my credit, my tenant history, my check writing history, any court records and/or my criminal record, and I hereby authorize & instruct any entity or person contact by Tenant Data Services Inc. or the Landlord or Landlord's agents to release such information to them. Upon request, Tenant Data will provide the name & phone number of the source of the information used in the verification process.

Applicant: _____ Date: _____

Leasing Agent: _____ Date: _____