

NOTE: DEPOSIT AND FIRST MONTH RENT MUST BE IN CASH OR CERTIFIED CHECK!

## RENTAL APPLICATION

Date \_\_\_\_\_

NAME (please print) \_\_\_\_\_

Place of employment: \_\_\_\_\_

Last two years residence: \_\_\_\_\_

Previous landlord: (Name, Address and Phone Number) \_\_\_\_\_

Annual income: \_\_\_\_\_

Social Security # \_\_\_\_\_ Driver License # \_\_\_\_\_

Names of dependents: \_\_\_\_\_

Name and phone number of closest relative: \_\_\_\_\_

Applicants phone number: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Name of insurance company and agent: \_\_\_\_\_

(We recommend each tenant have renters insurance)

Date of birth: \_\_\_\_\_ Marital status: \_\_\_\_\_

License plate number: \_\_\_\_\_

I CERTIFY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE TO THE BEST OF MY KNOWLEDGE AND THAT VERIFICATION MAY BE OBTAINED FROM ANY SOURCE HEREIN. I UNDERSTAND THAT IF I GIVE FALSE INFORMATION, I MAY BE CHARGED PENALTIES OR BE SUBJECT TO CRIMINAL PROSECUTION.

SIGNATURE OF APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF CO-APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

ADDITIONAL PROVISIONS TO RENTAL AGREEMENT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



**P.O. Box 2897**  
**Cheyenne, WY 82003**  
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\_\_\_\_\_  
TENANT

\_\_\_\_\_  
TENANT

\_\_\_\_\_  
MANAGER

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