

Rental Application

1600 Toronto Rd ◆ Springfield, IL 62712 ◆ tel 217-529-2900 ◆ fax 217-529-2925

(NOTE: Each adult person that will reside in the rental property (occupants) must complete and sign a separate application form)

(NOTE: All requests for information as set forth in this Application must be provided and any omission or misrepresentation of any information is automatic grounds for rejection of this application)

(NOTE: Lessor does not deny or reject applications on the basis of race, color, religion, national origin, sex, ancestry, age, marital status, physical or mental handicap, familial status or any other class protected by Article 3 of the Illinois Human Rights Act or federal law.)

Full Name			Phone () E-mail				
Priver's Lisc. No. /State	Rela	ationship					
Values of All Minor Occupantsotal Number of Occupants							
PLEASE GIVE YOUR RESI	DENCE HISTORY FO	R THE PAST	3 YEARS (Beginni	ng With T	he Most Current		
CURRENT ADDRESS	City		State_	Z	ip		
Month and Year Moved In	Reason for	Reason for Leaving					
CURRENT ADDRESS Month and Year Moved In Owner or Manager	Phone ()	Monthly	Rent \$			
REVIOUS ADDRESS (If within 3 Month and Year Moved InOwner or Manager	years)	City _		State	Zip		
Month and Year Moved In	Moved Out	Rea	ason for Leaving				
Owner or Manager	Phone ()	Monthly l	Rent \$			
REVIOUS ADDRESS (If within 3 Month and Year Moved InOwner or Manager	years)	City _		State	Zip		
Month and Year Moved In	Moved Out	Reason for Leavi					
Owner or Manager	Phone ()	Monthly	Rent \$			
PLEASE GIVE US YOUR E	MPLOYMENT HISTO	RY					
OUR STATUS: Employed	Full-Time Employe	ed Part-Time	Student	Retired	Not Employed		
CURRENT EMPLOYER (Or Most	Recent)						
Address			Phone ()			
D : () D 1 1/D	To		Position				
Date(s) Employed/From		Yo	Phone ()PositionYour Gross Monthly Salary \$				
Supervisor			•				
REVIOUS EMPLOYER							
REVIOUS EMPLOYER			Phone (
REVIOUS EMPLOYER			Phone (
REVIOUS EMPLOYER			Phone (
REVIOUS EMPLOYER	To		Phone (
REVIOUS EMPLOYERAddressDate(s) Employed/FromSupervisorPLEASE LIST YOUR INFO	ToTo	Yo	Phone (Position Our Gross Monthly Sa) lary \$			
REVIOUS EMPLOYER Address Date(s) Employed/From Supervisor	ToTo	Yo	Phone (Position Our Gross Monthly Sa) lary \$			

CONTINUED ON REVERSE SIDE

		harged or convicted of a crin If "yes", please explain char				
	ave pets? (Check Only on imal must be provided:	One): yes no NOTE:	: There is a two (2) anima	al limit. If "Yes", all o	f the following i	nformation
Animal No. 1	Type:	Breed:	Name:	Color:	Age (Years):	Weight (Lbs.)
No. 2						
IN C	ASE OF PERSONAL Address:	EMERGENCY, NOTIFY	/:	Relations	ship	
Hom	e Phone:		Work Phone: _			
em app oth	ployees, contractors and blicable or similar consu er source.	I the undersigned applicant of agents, to obtain a copy of r mer reporting agency and/or	ny credit report/history f obtain any information f	from the Credit Bureau from my current or any	or other any oth previous lessor	ner or any
		I the undersigned applicant un at most a prospective tenan		lease agreement, that i	no lease agreem	ent is
		, I the undersigned underst rt of Springfield, Inc. appro				
		I understand that in the even ply with all pre-possession co			greement is sign	ed by me
		I represent that I have answe nation on this application is				
Signatu	re of Applicant			Date S	Signed/	/
revised 12	2/08/11					
Application	on Checklist:	(For Owner's U	se Only)			
	Action		Date (MM/DD/YY):		Staff (Initial)	
>	Received Application:					
>	Checked Application for cor	mpletion of all information:				
>	Checked Application for sign	nature:				
>	Checked for other adult occ	upants separate application(s):		J		
>	Collected Application Proce	ss Fee (One Fee Per Applicant):				
Backgrou	nd Checklist:					
	Action		Date (MM/DD/YY):		Staff (Initial)	
>	Checked Credit Report					
>	Checked Court Records					
>	Checked Illinois Sex Offend	er List				
>	Checked Employment:					
>	Checked Landlord Reference	ces				
Application	on (Check Only One): Appr		Reason for denial	(attach all supporting documer	ntation if any):	