

Provines Estates LLC
 Return Application to:
 620 Park Rd #5, Woodward, OK
 Or: tlprovines@gmail.com
 580-571-2200

APPLICATION FOR RENTER

APARTMENT	RENT	DESIRED MOVE IN DATE / /	REFERRED BY	
PRIMARY APPLICANT INFORMATION				
LAST NAME	FIRST NAME	M.I.	SSN#	DRIVER'S LIC #
DATE OF BIRTH / /	HOME PHONE	CELL PHONE	WORK PHONE	EMAIL
CO-APPLICANT INFO RMATION				
LAST NAME	FIRST NAME	M.I.	SSN#	DRIVER'S LIC #
DATE OF BIRTH / /	HOME PHONE	CELL PHONE	WORK PHONE	EMAIL
ALL OTHER PROPOSED OCCUPANTS				
NAME		BIRTH DATE	RELATIONSHIP TO APPLICANT	
NAME		BIRTH DATE	RELATIONSHIP TO APPLICANT	
NAME		BIRTH DATE	RELATIONSHIP TO APPLICANT	
CURRENT ADDRESS				
STREET ADDRESS	CITY	STATE	ZIP	
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE	
MONTHLY RENT \$	REASON FOR LEAVING			
PREVIOUS ADDRESS				
STREET ADDRESS	CITY	STATE	ZIP	
DATE IN	DATE OUT	LANDLORD NAME	LANDLORD PHONE	
MONTHLY RENT \$	REASON FOR LEAVING			
EMPLOYMENT & INCOME INFORMATION				
1. PRIMARY APPLICANT OCCUPATION		EMPLOYER/COMPANY	MONTHLY SALARY \$	
SUPERVISOR NAME		PHONE	START DATE	END DATE
2. CO-APPLICANT OCCUPATION		EMPLOYER/COMPANY	MONTHLY SALARY \$	
SUPERVISOR NAME		PHONE	START DATE	END DATE
OTHER INCOME DESCRIPTION			MONTHLY INCOME \$	

EMERGENCY CONTACT INFORMATION

NAME	ADDRESS	PHONE	RELATIONSHIP
NAME	ADDRESS	PHONE	RELATIONSHIP

PERSONAL REFERENCES

NAME	ADDRESS	PHONE	RELATIONSHIP
NAME	ADDRESS	PHONE	RELATIONSHIP

BACKGROUND INFORMATION

HAVE YOU EVER:	FILED FOR BANKRUPTCY?	Willfully or intentionally refused to pay rent when due?
	Been evicted from a tenancy or left owing money? If yes, please provide Property Name, City, State and Landlord Name. <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Been convicted of a crime? If yes, please provide Type of Offense, County, and State <input type="checkbox"/> Yes <input type="checkbox"/> No	

VEHICLE INFORMATION

1. MAKE & MODEL	YEAR	LICENSE NO. & STATE
2. MAKE & MODEL	YEAR	LICENSE NO. & STATE

OTHER INFORMATION

HOW DID YOU HEAR ABOUT THIS PROPERTY?

PLEASE INCLUDE ANY OTHER INFORMATION YOU BELIEVE WOULD HELP TO EVALUTATE THIS APPLICATION

AGREEMENT & AUTHORIZATION SIGNATURE

I/we, believe that the statements above are true and correct. I/we, the undersigned, authorize the landlord and/or its agents to obtain an investigative consumer credit and/or criminal background check to be made, verification of information provided and communication with any and all names listed on this application. These reports my include the flowing types of information: names and dates of previous employers, public records, credit data, bankruptcy proceedings, eviction and criminal records, ect., from federal, state and other agencies which maintain such records.

By signing, I authorize without reservation, any party or agency contacted by StarPoint Screening to furnish the above-mentioned information. I understand that any discrepancy or lack of information may result in the rejection of this application. I understand that this is an application for an apartment and does not constitute a rental or lease agreement in whole or part. I further understand that there is a **non-refundable \$26 fee** for processing this application and I am not entitles to a refund even if I am not accepted as a tenant. In addition, there is a **non-refundable \$15 criminal background check fee** for Co-Applicants. Any questions regarding rejected application must be submitted in writing and accompanied by a self-addressed stamped envelope to 620 Park Rd. #5, Woodward, OK 73801.

SIGNATURE: _____

DATE: _____

SIGNATURE: _____

DATE: _____