IOWA RENTAL APPLICATION

THE PROPERTY (TO BE COMPLETED BY LANDLORD)			
Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:			
Property Address:			
Beds (#): [#] Square Feet (SF): [#]			
Lease Type: ☐ Fixed term ☐ Periodic Lease Start Date:			
Pets allowed? ☐ Yes ☐ No			
Monthly Rent \$ Application Fee: \$			
THE APPLICANT			
Applicant's Full Name: SSN:			
Date of Birth: Phone Number:			
E-Mail:			
Photo ID: □ Driver's License □ Passport □ Other:			
ID#:			
Additional Occupant(s)? ☐ Yes ☐ No			
If yes, describe:			
Pet(s)? ☐ Yes ☐ No			
If yes, describe:			
CURRENT RESIDENCE			
Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other:			
Property Address:			
Monthly Rent (\$): Beds (#): Baths (#): Square Feet (SF):			
Lease Start: Lease End:			
Reason for Moving:			
Landlord's Name:			
_andlord Email: Landlord Phone:			



PREVIOUS	RESIDENCE - 1			
Property Type: ☐ Apartment ☐ Condominium	n □ Home □ Other:			
Property Address:				
	Baths (#): Square Feet (SF):			
Lease Start: Lease End:				
Reason for Moving:				
Landlord's Name:				
Landlord Email: La	andlord Phone:			
PREVIOUS RESIDENCE - 2				
Property Type: ☐ Apartment ☐ Condominium	n 🗆 Home 🗆 Other:			
Property Address:				
Monthly Rent (\$): Beds (#)	Baths (#): Square Feet (SF):			
Lease Start: Lease En	d:			
Reason for Moving:				
Landlord's Name:				
Landlord Email: La	andlord Phone:			
CURRENT EMPLOYER				
CORRENT	EMPLOTER			
Company Name:	<u></u>			
Employer's Address:				
Title / Occupation:	<u></u>			
Gross Monthly Income: \$	Start Date:			
Supervisor Name:				
Supervisor Phone:	Supervisor Email:			
PREVIOUS EMPLOYER				
Company Name:				
Employer's Address:				
Title / Occupation:				
Gross Monthly Income: \$				
Supervisor Name:				
Supervisor Phone:	Supervisor Email:			



	VEHICLE(S)			
Do you own a vehicle? \square Yes (describe below) \square No				
Make:	Model:	Year:		
	Plate #:	State:		
Do you own a second vehicle? ☐ Yes (describe below) ☐ No				
Make:	Model:	Year:		
Color:	Plate #:	State:		
REFERENCES				
Full Names	Deletienskin			
Full Name:				
E-Mail:	Phone:			
Full Name:	Relationship:			
E-Mail:				
Full Name:	Relationship:			
E-Mail:	Phone:			
BACKGROUND INFORMATION				
Have you ever been evicted or a defendant in an eviction action? ☐ Yes ☐ No If yes, describe:				
Have you ever filed, or are you in the process of filing bankruptcy? \square Yes \square No				
If yes, describe:				
Do you have any outstanding balances with past landlords? \square Yes \square No				
If yes, describe:				
Have you ever been asked to move for a lease violation of any kind? \square Yes \square No				
If yes, describe:				
Have you ever been convicted of a crime? ☐ Yes ☐ No				
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If yes, describe:				



CONSENT & ACKNOWLEDGMENT

I hereby certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain an investigative consumer credit report including but not limited to credit history, OFAC search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, bank representatives, and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential. I hereby hold Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C. 20580.

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742

These consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

Application Fee: \$	
Applicant's Signature:	Date:
Printed Name:	

