

Highland Green Apartments

Rental Application

807 Legion Street, Craig, CO 81625

NAME _____ AGE _____

SPOUSE _____ AGE _____

NUMBER OF CHILDREN & AGES _____

PRESENT ADDRESS _____

PHONE NUMBER _____ E-MAIL _____

PREVIOUS LANDLORD _____ PHONE _____

PRESENT EMPLOYER _____ PHONE _____

HOW LONG _____ POSITION _____ MONTHLY INCOME _____

SUPERVISOR'S NAME & TITLE _____

PREVIOUS EMPLOYER _____ PHONE _____

HOW LONG _____ POSITION _____ MONTHLY INCOME _____

SOCIAL SECURITY NUMBER _____

DRIVER LICENSE _____

MAKE & MODEL OF VEHICLE _____

LICENSE PLATE _____

PERSONAL REFERENCES:

1. _____
NAME ADDRESS PHONE

2. _____
NAME ADDRESS PHONE

NOTIFY IN CASE OF SICKNESS OR ACCIDENT:

NAME _____ RELATIONSHIP _____

ADDRESS _____

PHONE _____