

1 **Southwest Management Group**  
1 **Vacation Rentals & Short-Term Housing Division**  
**RENTAL APPLICATION**

**PROPERTY ADDRESS** \_\_\_\_\_ **MOVE-IN DATE:** \_\_\_\_\_

**CITY, STATE, ZIP** \_\_\_\_\_

RENT: \$ \_\_\_\_\_ / \_\_\_\_\_ CLEANING FEE: \$ \_\_\_\_\_

REFUNDABLE DEPOSITS: Security: \$ \_\_\_\_\_ Key: \$ \_\_\_\_\_ Pet: \$ \_\_\_\_\_ Other: \$ \_\_\_\_\_

EVIDENCE BY: cash \_\_\_\_\_ check \_\_\_\_\_ cashier check \_\_\_\_\_ credit card \_\_\_\_\_

**REASON FOR RENTAL:** ? Vacation ? Temporary Relocation ? Other \_\_\_\_\_

**APPLICANT:** \_\_\_\_\_

HOME # \_\_\_\_\_ CELL # \_\_\_\_\_

EMAIL: \_\_\_\_\_ SSN# \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

LANDLORD NAME/MORTGAGE HOLDER \_\_\_\_\_

PHONE # \_\_\_\_\_ HOW LONG? \_\_\_\_\_ ? OWN ? RENT

REASON FOR LEAVING \_\_\_\_\_

**CURRENT EMPLOYER:** \_\_\_\_\_

HOW LONG: \_\_\_\_\_ EMPLOYED AS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

SALARY: \$ \_\_\_\_\_ / \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

**CO-APPLICANT:** \_\_\_\_\_

HOME # \_\_\_\_\_ CELL # \_\_\_\_\_

EMAIL: \_\_\_\_\_ SSN# \_\_\_\_\_

DRIVERS LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_ BIRTH DATE \_\_\_\_\_

**CURRENT ADDRESS:** \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

LANDLORD NAME/MORTGAGE HOLDER \_\_\_\_\_

PHONE # \_\_\_\_\_ HOW LONG? \_\_\_\_\_ ? OWN ? RENT

REASON FOR LEAVING \_\_\_\_\_

**CURRENT EMPLOYER:** \_\_\_\_\_

HOW LONG: \_\_\_\_\_ EMPLOYED AS: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_

PHONE # \_\_\_\_\_ FAX # \_\_\_\_\_

SALARY: \$ \_\_\_\_\_ / \_\_\_\_\_ SUPERVISOR: \_\_\_\_\_

**AUTOMOBILE:**

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LIC# \_\_\_\_\_ STATE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LIC# \_\_\_\_\_ STATE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_

MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LIC# \_\_\_\_\_ STATE \_\_\_\_\_ YEAR \_\_\_\_\_ COLOR \_\_\_\_\_

**IN ADDITION TO APPLICANT(S), OTHER PERSONS TO BE AT PREMISES:**

**PETS?** TYPE \_\_\_\_\_ BREED \_\_\_\_\_ WEIGHT \_\_\_\_\_ AGE \_\_\_\_\_ SPAYED/NEUTERED? Y / N

\*\*\*\*\*A COPY OF DRIVERS LICENSES/IDENTIFICATION MUST BE PROVIDED WITH THIS APPLICATION FOR ALL PERSONS WHO WILL OCCUPY THIS UNIT . \*\*\*\*\*

**I have provided true and accurate information as requested above,**

APPLICANT SIGNATURE

DATE

CO-APPLICANT SIGNATURE

DATE