



Eastman Real Estate
 2008 W 33rd Street
 Sioux Falls, SD 57105

APPLICATION TO RENT THE PROPERTY LOCATED AT: _____ **Move In Date:** _____

Applicant(s) Full Names *include all Children	Phone #	Date of Birth	Social Security #	Driver's License # (if different than SS#)

WHAT DO YOU DRIVE?

Make	Model	Year	License Plate #	State

QUALIFICATION WORKSHEET

Are tenant and co-tenant related? Yes No

If yes, state relationship: _____

1. Tenant currently named in a lawsuit? Yes No

2. Co-Tenant currently named in a lawsuit? Yes No

If yes, please explain: _____

1. Has the Tenant ever filed for bankruptcy? Yes No

2. Has the Co-Tenant ever filed for bankruptcy? Yes No

If yes, please explain: _____

1. Do you the Tenant have any unpaid judgments against you? Yes No

2. Do you the Co-Tenant have any unpaid judgments against you? Yes No

If yes, please explain: _____

GROSS MONTHLY INCOME (BEFORE TAX DEDUCTIONS)

	Applicant 1	Applicant 2	Total
Gross Hourly Salary	_____	_____	_____
Hourly Worked/Week	_____	_____	_____
Gross Monthly Salary	_____	_____	_____
Overtime	_____	_____	_____
Commission/Bonus	_____	_____	_____
Subtotal earned income			_____

MONTHLY LIABILITIES

	Applicant 1	Applicant 2	Total
Mortgage/2nd Mortgage Pymts	_____	_____	_____
Car Loan	_____	_____	_____
Alimony/Child Support	_____	_____	_____
Student Loan	_____	_____	_____
Child Care	_____	_____	_____
Other Monthly Pymts	_____	_____	_____
Credit Cards	_____	_____	_____
Other Debts	_____	_____	_____
Total of all Liabilities			_____

Do you have any pets? Yes/No	Kind, weight, breed, age, other info:
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APPLICANT 1.....WHERE DO YOU LIVE RIGHT NOW?

Address <u>City, State, Zip</u>		How much is your rent/mortgage?
Landlord or Mortgage Holder		Landlord Phone #
Reason for Moving		May we contact? Yes No

WHERE DO YOU LIVE BEFORE?

Address <u>City, State, Zip</u>		How much is your rent/mortgage?
Landlord or Mortgage Holder		Landlord Phone #
Reason for Moving		May we contact? Yes No

WHERE DO YOU WORK?

Where do you work?		How long have you been there?	How much do you make? \$/month
Address <u>City, State, Zip</u>		Supervisor Name & Phone#	
Your Work Phone#		May we contact? Yes No	

WHERE DO YOU WORK BEFORE?

Where do you work?		How long have you been there?	How much do you make? \$/month
Address <u>City, State, Zip</u>		Supervisor Name & Phone#	
Your Work Phone#		May we contact? Yes No	

PERSONAL REFERENCES, CREDIT & OTHER INFORMATION

Closest living relative NOT living with you?	Where do you bank?
<u>Name</u>	
<u>Address</u>	<u>Address</u>
<u>City, State, Zip</u>	<u>City, State, Zip</u>
<u>Phone #</u>	<u>Phone #</u>
<u>Relationship</u>	

Have you or anyone listed on this application been convicted of a felony, misdemeanor AND/OR been convicted or sued for non-payment of rent or damage to rental property? (circle one) Yes No

I/we affirm that we have answered all the previous questions to the best of our knowledge. I/we authorize you to contact our employer, our references, run a credit check on me/us to determine our creditworthiness. Owners/managers will not refuse to rent to any prospective tenant(s) on the basis of color, handicap, race, religion, sex, familial status or national origin. Application qualification is base on, but not limited to , rental, credit, criminal and employment history as well as overall evaluation by the owner/manger to find the best tenant(s).

Applicant(s) hereby provide permission to the owner/manager and their authorized agents to obtain a credit report and any other necessary information for use in processing the application.

Applicant Signature	Date
Owner/Agent	Date



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APPLICANT 2.....WHERE DO YOU LIVE RIGHT NOW?

Address <u>City, State, Zip</u>		How much is your rent/mortgage?
Landlord or Mortgage Holder		Landlord Phone #
Reason for Moving		May we contact? Yes No

WHERE DO YOU LIVE BEFORE?

Address <u>City, State, Zip</u>		How much is your rent/mortgage?
Landlord or Mortgage Holder		Landlord Phone #
Reason for Moving		May we contact? Yes No

WHERE DO YOU WORK?

Where do you work?		How long have you been there?	How much do you make? \$ /month
Address <u>City, State, Zip</u>		Supervisor Name & Phone#	
Your Work Phone#		May we contact? Yes No	

WHERE DO YOU WORK BEFORE?

Where do you work?		How long have you been there?	How much do you make? \$ /month
Address <u>City, State, Zip</u>		Supervisor Name & Phone#	
Your Work Phone#		May we contact? Yes No	

PERSONAL REFERENCES, CREDIT & OTHER INFORMATION

Closest living relative NOT living with you?	Where do you bank?
<u>Name</u>	
Address <u>City, State, Zip</u>	Address <u>City, State, Zip</u>
Phone #	Phone #
Relationship	

Have you or anyone listed on this application been convicted of a felony, misdemeanor AND/OR been convicted or sued for non-payment of rent or damage to rental property? (circle one) Yes No

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Applicant Signature	Date
Owner/Agent	Date



AUTHORIZATION FOR RELEASE FOR INFORMATION

ALL adult household members must sign a separate form



CONSENT

I authorize and direct any Federal, State, or local agency, organization, business, or individual to release to Eastman Real Estate Any information or materials needed to complete and verify my application for participation, and/or to maintain my continued assistance under the Section 8, Rental Rehabilitation, low income Public and Indian Housing, and/or other housing assistance programs. I understand and agree that this authorization of the information obtained with its use may be given to and used by the Department of Housing and Urban Development (HUD) or Rural Development (RD) in administering and enforcing program rules and policies. I also consent for HUD or RD or the PHA to release information from my file about my rental history to HUD or RD, credit bureaus, collection agencies, or future landlords. This includes records on my payment history, and any violations of my lease or PHA policies.

INFORMATION COVERED

I understand that, depending on program policies and requirements, previous or current (information regarding my household or me may needed. Verifications and inquiries that may be requested include but are not limited to:

- | | | |
|------------------------------|----------------------------------|------------------------------|
| IDENTITY AND MARITAL STATUS | EMPLOYMENT, INCOME, AND ASSETS | RESIDENCES & RENTAL ACTIVITY |
| CREDIT AND CRIMINAL ACTIVITY | MEDICAL OR CHILD CARE ALLOWANCES | |

I understand that this authorization cannot be used to obtain any information about me that is not pertinent to my eligibility for any continued participation in a housing assistance program.

GROUPS OR INDIVIDUALS THAT MAY BE ASKED

The groups or individuals that may be asked to release the above information (depending on program requirements) includes but is not limited to:

- | | | |
|---|--|---|
| LANDLORDS (INCLUDING
PUBLIC HOUSING AGENCIES)
TRIBAL, LOCAL, STATE, & FEDERAL
COURTS AND POST OFFICES
SUPPORT AND ALIMONY PROVIDERS
SOCIAL SECURITY ADMINISTRATION
MEDICAL & CHILD CARE PROVIDERS | PAST AND PRESENT EMPLOYERS
VETERANS ADMINISTRATION
STATE UNEMPLOYMENT AGENCIES
BANKS & OTHER FINANCIAL
INSTITUTION
CREDIT PROVIDERS & CREDIT
BUREAUS | WELFARE AGENCIES
RETIREMENT SYSTEMS
UTILITY COMPANIES
LAW ENFORCEMENT AGENCIES
SCHOOLS AND COLLEGES |
|---|--|---|

COMPUTER MATCHING NOTICE AND CONSENT

I understand and agree that HUD or RD, or the Public Housing Authority my conduct computer-matching programs to verify the information supplied for my application or recertification. If a computer match is done, I understand that I have a right to notification found and a chance to disprove incorrect information. HUD or RD or the PHA may in the course of its duties exchange such automated information with other Federal, State, or local agencies, including but not limited to: State Employment Security Agencies; Department of Defense; Office of Personnel Management; the U.S Postal Service; the Social Security Agency; and State welfare and food stamp agencies.

For information requested from financial institutions, Eastman Real Estate certifies that it handles all information gathered in compliance with the application provisions of the Right to Financial Privacy Act of 1978. "This Institution is an Equal Opportunity Provider & Employer."

PENALTIES FOR MISUSING THIS CONSENT

Title 18, Section 1001 of the U.S Code states that a person's guilty of felony for knowingly and willingly make false or fraudulent statements to any department of the United States Government. HUD and any owner (or any employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper use of information collected based on the consent form. Use of the information collected base on this verification from is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains or participant affected by negligent disclosure of information may bring civil action for damages, and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 42 U.S.C 208 (f), (g) and (h). Violation of these provisions are cited as violations of 42 (f) , (g) and (h).

CONDITIONS

I AGREE THAT A PHOTOCOPY OF THIS AUTHORIZATION MAY BE USED FOR THE PURPOSES STATED ABOVE. I UNDERSTAND I HAVE A RIGHT TO REVIEW MY FILE AND CORRECT ANY INFORMATION THAT I CAN PROVE IS INCORRECT.

SIGNATURE

Head of household

(Print Name)

Date

Authorized Owner/Representative

(Print Name and Title)

Date

NOTE: THIS GENERAL CONSENT MAY NOT BE USED TO REQUEST A COPY OF A TAX RETURN IS NEEDED, IRS FORM 4506, "REQUEST FOR COPY OF TAX FORM" MUST BE PREPARED AND SIGNED SEPARATELY.



AUTHORINZATION FOR RELEASE FOR INFORMATION

ALL adult household members must sign a separate form



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CREDIT AND CRIMINAL ACTIVITY

EMPLOYMENT, INCOME, AND ASSETS
MEDICAL OR CHILD CARE ALLOWANCES

RESIDENCES & RENTAL ACTIVITY

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TRIBAL, LOCAL, STATE, & FEDERAL
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BANKS & OTHER FINANCIAL
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RETIREMENT SYSTEMS
UTILITY COMPANIES
LAW ENFORCEMENT AGENCIES
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Date

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LANDLORD VERIFICATION



APPLICANT NAME(S): _____

The below captioned individual has made application with us for a residence. We would appreciate verification of your experience with this party as your resident.

By signing below I authorized the below stated Individual/Department to provide this information And return it to the person indicated.

Date of 1st Request: _____ Date of 2nd Request: _____

SEE ATTACHED AUTHORIZATION

Application/Resident Occupancy Manager Date

This form should be completed by: Attention: _____ Company: _____ Address: _____ City, St: _____ Phone: _____ Fax: _____

This form should be returned to: Manager: _____ Company: Eastman Real Estate Address: 2008 W. 33rd Street City, St: Sioux Falls, SD 57105 Phone: (605) 338-4000 Fax: (605) 338-2123

Address1: _____ From _____ To _____ Address2: _____ From _____ To _____

- 1. Rental Payments a. Is(Was)applicant current on rent? Yes No b. Has(Had) the rent ever been late? Yes No If yes, how late? _____ How often? _____ Yes No
2. Caring for the residence a. As to cleanliness & care of unit, please rate applicant(1 being best, 4 being worst) 1 2 3 4 b. Has(Had) the applicant/guests damaged the residence? Yes No If yes, how? _____ Costs? _____ Yes No c. Will(Did) you keep any of the Security Deposit? Yes No What for? _____ How much? _____
3. General a. Does(Did) the applicant allow unauthorized persons to live in the unit? Yes No b. Has(Had) the applicant/guests damaged the residence? Yes No If yes, how? _____ paid for? Yes No c. Does(Did) the applicant create any physical hazards? Yes No Of other Tenants? _____ How? _____ e. Has(Did) the applicant given you any false information? Yes No Describe: _____ f. Would you re-admit this applicant? Yes No If no, why not? _____
5. Were the police ever called as a result of a disturbance? Yes No Comments: _____
6. Were there problems with neighbors? Yes No
7. Were there problems with pest infestation? Yes No
8. Did the resident give you the proper notice to vacate? Yes No
9. Other potential problems that may be important for a landlord to know? _____
10. Other Comments: _____

Warning: Section 1001 of title 18, United States Code provides: "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up a material fact, or makes any false, fictitious or fraudulent statements or representations or makes, or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both."

Signature Printed Name/Title Date

(January 2007) "This Institution is an Equal Opportunity Provider & Employer"



The following criteria may render an applicant unacceptable at this time

1. Current and prior landlords will be contacted to determine rent payment history, disturbance of neighbors, destruction of property or housekeeping habits that may pose a threat to the and/or other residents.
2. Household composition must not exceed more than two people per bedroom.
3. Gross monthly income must be 2-3 times the monthly rent of rental unit.
4. Any household member convicted of a felony within the past five years.
5. Any household member who is subject to a registration requirement under a State Sex Offender Registration Program will not be allowed to reside on the property a felony Conviction during tenant occupancy will be grounds for termination of lease agreement.
6. An applicant's misrepresentation of any information related to the above or at anytime during the application process.

Item # of Concern_____

Explanation

Signature

Date (Rev.1.13.11)

Signature

Date (Rev.1.13.11)

Continue search_____

Unable to correct at this time_____