

Fort Sheridan Place
610-638 Sheridan Road
Highwood, IL 60040

Building _____ Apartment _____

APPLICANT

Applicant Name (First, MI, Last) _____ Individual Joint Guarantor

Social Security Number: _____ | Date of Birth: _____

Driver's License Number/State: _____ Vehicle Make/Model/Plate #: _____

Address (Street, City, State, ZIP Code): _____ Reason for Moving: _____
How did you hear about us? _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email Address: _____

Have you ever been convicted of a felony? Yes No If yes, explain _____
 Have you been sent to collections in the past 6 months? Yes No If yes, explain _____
 Have you ever been sent to collections by a landlord? Yes No If yes, explain _____
 Do you have any outstanding collection for more than \$500? Yes No If yes, explain _____
 Have you ever been evicted? Yes No If yes, explain _____
 Have you ever filed for bankruptcy? Yes No If yes, explain _____

Own Rent From: _____ To: _____

Present Landlord / Mortgagee: _____

Landlord Phone: _____ Monthly Amount: _____

How long have you lived at your current address? _____ Date current lease expires _____

EMPLOYMENT/INCOME INFORMATION

Employer: _____ From: _____ To: _____

Address: _____ Personnel Phone: _____

Position / Title / Type of Business: _____

Gross Monthly Income: \$ _____ Additional Monthly Income: \$ _____

PERSON(S) TO OCCUPY THE APARTMENT IN ADDITION TO THE APPLICANT(S)

Name: _____ Relationship: _____ Date of Birth: _____

Name: _____ Relationship: _____ Date of Birth: _____

Name: _____ Relationship: _____ Date of Birth: _____

Name: _____ Relationship: _____ Date of Birth: _____

Pet: Yes No Type/Breed: _____ Size/Weight: _____

IN CASE OF EMERGENCY: I hereby give consent to contact the individual below:

Local Contact Name: _____ Relationship: _____

Address: _____ Phone #: _____

ACKNOWLEDGEMENT AND AGREEMENT:

Landlord may refuse to rent to Applicant if any of the information provided herein is found to be untrue, and may terminate Applicant's tenancy if information provided herein is found to be untrue after renting to Applicant.

If Landlord rents premises to Applicant, possession of the unit shall not be provided to Applicant until, in Landlord's sole discretion, the premises are ready for occupancy. Except as provided in the lease, the Landlord shall not be liable for damages in the event the premises are not ready for occupancy on the date prescribed in the lease, and Landlord shall not be liable for damages in any event where the premises cannot be occupied on the prescribed date because of causes beyond Landlord's control.

I authorize the person to whom this application is made and any credit bureau, police department or other investigative agency employed by such person to investigate any references herein listed or statements or other data obtained from me or from any other source pertaining to my credit or financial responsibility. I also authorize the person to whom this application is made (including his or her agents) to obtain a copy of my credit report to assist in evaluating my application and, thereafter, to obtain and use in attempting to collect unpaid rent, late fees, or other charges from me.

I CERTIFY THAT ALL OF THE INFORMATION I HAVE PROVIDED IN RESPONSE TO THE QUESTIONS CONTAINED IN THIS APPLICATION IS TRUE. I FURTHER CERTIFY THAT I HAVE READ THE CONDITIONS CONTAINED AT THE BOTTOM OF THE APPLICATION FORM, THAT I UNDERSTAND THEM, AND THAT I VOLUNTARILY SUBMIT THIS APPLICATION.

Applicant's Signature: _____ Date: _____

Management Representative Signature: _____ Date: _____ Time Received: _____

Approved Approved with Conditions Denied By: _____ Date: _____
Conditions: _____

OFFICE USE ONLY Application Fee: \$ _____

FUNDS COLLECTED: Receipt Number: _____