

Date: _____

Property Desired: _____

Move In Date: _____

Monthly Rental Rate: _____

**APP FEE: \$35 – 1 ADULT****\$20 – PER ADDITIONAL**

Applications received without the fees may not be processed. Except for married individuals each co-applicant must submit a separate application and application fee.

RENTAL APPLICATION

Thousand Hills Realty, Inc.
2800 Green Mountain Dr (Bldg. 1, Suite F)
Branson, Mo. 65616
PH. (417) 337-8081 FAX (417) 336-5003

www.thousandhillsrealty.com
Unless otherwise noted, the security deposit is equal to one month's rent.

Applicant Full Name: _____ Date of Birth: _____
(First) (Middle) (Last)

Home Phone _____ Cell _____ Work _____

Email Address: _____

Social Security No.: _____ Drivers Licensed No.: _____ State: _____

Co-Applicant Full Name: _____ Date of Birth: _____
(First) (Middle) (Last)

Home Phone _____ Cell _____ Work _____

Email Address: _____

Social Security No.: _____ Drivers License No.: _____ State: _____

RESIDENT HISTORY – Please use separate page if additional space is needed

Current Address _____

Street City State Zip Years

Owner/Manager _____ \$ _____

Name Phone Rent

Previous Address _____

Street City State Zip Years

Owner/Manager _____ \$ _____

Name Phone Rent

(We need to verify 2 years of residency for each applicant, if you need extra space please use the back)**EMPLOYMENT HISTORY – Please use separate page if additional space is needed**

Applicant Status (Please mark all that apply): ☐ Employed Full-Time ☐ Employed Part-Time ☐ Student ☐ Retired ☐ Unemployed

Current Employer Address Phone Years

Position **Salary** (Supervisor's Name) Phone

Co-Applicant Status (Please mark all that apply): ☐ Employed Full-Time ☐ Employed Part-Time ☐ Student ☐ Retired ☐ Unemployed

Co-Applicant Employer Address Phone Years

Position **Salary** (Supervisor's Name) Phone

ADDITIONAL INCOME – Please use separate page if additional space is needed

Income Source: _____ Amount: _____

Verify With: _____ Phone: _____

OTHERS WHO WILL BE LIVING WITH YOU, INCLUDING CHILDREN (ANYONE OVER 18 MUST BE ON THE LEASE)

Name: _____ Relationship: _____

Birth Date: _____

Name: _____ Relationship: _____

Birth Date: _____

Name: _____ Relationship: _____

Birth Date: _____

MISCELLANEOUS INFORMATION - Please use separate page if additional space is needed

Does anyone smoke that will be living in the residence? Yes _____ No _____

Have you ever filed for bankruptcy? Yes _____ No _____ If yes, what year _____

Have you or any member of your household ever been convicted of or plead guilty or "no contest" to any felony?

Yes _____ No _____

Have you or any member of your household ever been convicted of or plead guilty or "no contest" to a sexual offense?

Yes _____ No _____

Have you or any member of your household ever been listed on a registry of sexual offenders? Yes _____ No _____

Have you or any member of your household ever been convicted of or pled guilty or "no contest" to any drug-related criminal offense?

Yes _____ No _____ If yes, please explain:

Have you ever been evicted from tenancy? Yes _____ No _____

Have you ever willfully or intentionally refused to pay rent when due? Yes _____ No _____

If yes, why? _____

PETS (Approved pets require a minimum of \$250 (per pet) additional deposit.)

Yes _____ No _____

1) Name: _____ Type/Breed: _____ Size: _____

2) Name: _____ Type/Breed: _____ Size: _____

BANK AND CREDIT INFORMATION

Your Bank(s) City/State, Branch, Type of Acct.

1) _____

2) _____

Credit References City/State, Acct. No.

1) _____

2) _____

3) _____

VEHICLE INFORMATION - Please use separate page if additional space is needed

Your Vehicle Make/Model: _____ Year: _____ Tag No.: _____ State: _____

Second Vehicle Make/Model: _____ Year: _____ Tag No.: _____ State: _____

Other Vehicles: _____

EMERGENCY CONTACT ~ SOMEONE NOT LIVING WITH YOU

1) Name: _____ Address: _____

Relationship _____ Phone: _____

2) Name: _____ Address: _____

Relationship _____ Phone: _____

CONFIRMATION OF REAL ESTATE BROKERAGE DISCLOSURES

The undersigned Applicant(s) (Lessee) hereby confirms that disclosure was made to the undersigned or their respective agent(s) or transaction broker(s) that **the Licensee assisting the Applicant(s) is a Landlord's (Lessor's) Agent** no later than the first showing of the Property, upon first contact or immediately upon the occurrence of any change to the brokerage relationship. The Applicant(s) also confirm:

The undersigned also understands that the Licensees' Broker's compensation will be paid by the Landlord (Lessor).

The undersigned acknowledges receipt of a copy of the Missouri Broker Disclosure Form upon first contact or prior to any licensee obtaining any personal or financial information, whichever occurred first.

Signature of Applicant _____ Date Signed _____

Signature of Applicant _____ Date Signed _____

THOUSAND HILLS REALTY, INC.

Authorized Agent _____ Date Signed _____

APPLICATION AGREEMENT

Please initial:

_____ Each of the undersigned hereby acknowledges that any holder of this application, its servicers, successors and assigns, may verify or re-verify any information contained in this application or obtain any information or data relating to this application, for any legitimate business purpose through any source, including a source named in this application or a consumer reporting agency. **I authorize the Landlord to obtain a current credit and criminal background check.**

_____ I Agree: I represent that the information provided in this application is true, complete and accurate to the best of my knowledge. I understand that any misrepresentation or omission of information is grounds for eviction.

_____ I Agree: I understand that the information provided might be used by Landlord to determine whether to accept this application. I authorize Landlord to verify all the information, personal references and employment provided.

_____ I Agree: I understand that this application is not a rental agreement and that this application does not create any obligation of the landlord.

Applicant(s) has deposited an "Application Fee" in the amount of \$ _____ (nonrefundable) for the application process.

Signature of Applicant: _____ Date Signed: _____

Signature of Applicant: _____ Date Signed: _____