RETURN TO: ROCKWOOD LIVING LLC, 32745 Walker Road, Suite B, Avon Lake, OH 44012 440-933-2500

ROCKWOOD LIVING RENTAL APPLICATION

RENTAL FORM MUST BE COMPLETELY FILLED OUT AND SIGNED. APPLICATION FORM MUST HAVE ALL QUESTIONS ANSWERED AND SIGNED BEFORE IT CAN BE PROCESSED. APPLICATION WILL BE HELD ACTIVE FOR 6 MONTHS. AFTER THAT DATE, THIS OFFICE MUST BE NOTIFIED IF AN EXTENSION IS REQUESTED.

This application is presente	d to owner or its agen	t without regard to rac	e, color, cree	d, sex or na	tional origin.		
-	Hudson Court _	Montego Place	Shoreh	am Park _	Housing		
Full Name:			Single_	Married_	Widowed	Divorced_	Age:
Co-tenant:			Single_	_Married_	Widowed	_Divorced_	Age:
Present Address:							
Street & N Phone:	0.	Email a	Cit .ddress:	у	Stat	е	Zip
Phone:Address Past 3 Yrs:		· · · · · · · · · · · · · · · · · · ·					
ricason for Ecaving.							
Total number of persons to occupy suite: No. of Adults: No. of children: Ages of children: MAXIMUM 2 ADULTS TO OCCUPY A ONE BEDROOM APARTMENT. (NO INCREASE IN OCCUPANTS IS ALLOWED WITHOUT							
WRITTEN PERMISSION OF LESSOR OR AGENT.) Social Security No. of Applicant:Social Security No. of Spouse or Co-Tenant:							
Do you have a pet:							
Name & Address of present	t landlard:						
Former landlord (if present		yrs.)					
Amount of rent:			Land	dlord's Pho	ne No.:		
Tenant's Employer		Addre	ss.				
Tenant's Employer: Job Title: Length of Service: Type of Automobile: Number of Autos That You	Who to Contac	ct:			Phone):	
Length of Service:	Monthly Income:	Othe	er Income:		Source:		
Type of Automobile:	(Proof of Inc Year:	License Plate	e No.	Sta	ate of Registry	/:	
Number of Autos That Tou	Will Reep At This Add		CIVET CIVE	AO I OIVIOD	ILL ALLOWL		
Boats, trucks, trailers, moto Personal References:	rcycles, inoperable or	unlicensed automobil	es, campers &	& recreation	ial vehicles ar	e prohibited	on the premises.
1.							
Name	Add	Iress		Relation	nship	Pho	one
2.							
Name	Add	Iress		Relation	nship	Pho	one
							· · · · · · · · · · · · · · · · · · ·
In case of an emergency Notify (2 Contacts please):1						· · · · · · · · · · · · · · · · · · ·	
Address:					Ph	one.	
Street & No	. City	/	State	Zi		01101	· · · · · · · · · · · · · · · · · · ·
In case of an emergency No	otify: 2				Ro	lationshin:	
in case of all emergency in	Ottily. 2				1 10	iationsiip	
Address:	0.7			 -	Ph	one:	
Street & No	. City	<u>/</u>	State	Zi	р		
Type of Accommodation De	esired:Apartme	ntTownhouse	Number of E	Bedrooms:	Date N	Needed:	
						Мо	nth Year
Have you ever been evicted	d for nonpayment of re	ent:Or o	ther reasons:		_lf yes, explaii	n:	
The undersigned warrants a references, verify income, e landlord accepting credit lessee wants a signed lease All applicants MUST sign the	employment, rental his rating and backgrou e canceled, it is under	story and obtain a writt I nd check (\$35 applic	e true and cor en credit repo cation fee per	mplete and ort and back r <mark>applicant</mark>	ground check	c. Application	on subject to
					-		
APPLICANT SIGNATURE	UNLY				Da	te:	
APPLICANT SIGNATURE	ONLY						