

JAGLETS PROPERTIES, LLC.

RENTAL APPLICATION

Fax back to 859-231-7535 or email to jaglets@gmail.com

Phone # 859-559-7162

RENTAL HISTORY

Applicant Name _____ SS# _____ School Year _____
DOB _____
Email address: _____ Mobile # _____

Parents Name and Address _____

Email address: _____ Mobile # _____

Will your Parents be responsible for mailing the checks to me ? Yes or No (circle one)

In case of emergency contact: _____ Mobile # _____

Present Address _____ How Long? _____

Landlord Name/Contact _____ Phone # _____

Previous Address _____ How Long? _____

Landlord Name/Contact _____ Phone # _____

CREDIT HISTORY

Credit Cards _____ Balance _____ Monthly Payment _____

Credit Cards _____ Balance _____ Monthly Payment _____

Car Payment _____ Balance _____ Monthly Payment _____

Other Liability _____ Balance _____ Monthly Payment _____

EMPLOYEMENT INFORMATION

Place of Employment _____ How Long? _____ Phone # _____

Supervisor's Name _____ Montly Net Income? _____

RELEASE

I, the undersigned hereby swear that the above information is true. In addition, my signature below gives the landlord, John and/or Trudy Sims the right to make credit inquiries.

Applicant _____ Date _____

Landlord _____ Date _____