

## COLORADO RESIDENTIAL RENTAL APPLICATION

(Applicants must complete all sections. An incomplete form will not be processed.)

### THE PROPERTY: 20 W Washington Street, Colorado Springs, CO 80907

4 Bedrooms, 3-1/2 Baths, 3,015 Square Feet (SF) Available date: 05/01/2024

Minimum Lease Term: 2 years Monthly Rent: \$ 3,195

**Minimum Qualification Standards for Tenants:** No smoking (includes marijuana), illegal drugs, or criminal activity allowed. Tenant pays for utilities and renter's insurance. Small dogs up to 20 pounds may be allowed (maximum 2) with pet deposit. Tenant agrees to provide SSN and Driver License and consents to credit history check and background check.

### THE APPLICANT

Applicant's Full Name: \_\_\_\_\_ Date of Birth: (MM/DD/YYYY) \_\_\_\_\_

Email: \_\_\_\_\_ SSN: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Phone Number: \_\_\_\_\_

Provide copy of Photo ID front and back: \_\_\_\_\_ Driver's License \_\_\_\_\_ Passport \_\_\_\_\_ Other: \_\_\_\_\_

ID#: \_\_\_\_\_

Additional Occupant(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, describe: (PROVIDE SSN FOR THOSE OVER 18 YEARS OF AGE)

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_ SSN \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Pet(s)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, describe: (DESCRIBE PETS (IF ANY).)

Name: \_\_\_\_\_ Date of Birth \_\_\_\_\_

Color/ Markings: \_\_\_\_\_ Weight: \_\_\_\_\_ Breed: \_\_\_\_\_

### Current Residence

Property Type: \_\_\_\_\_ Apartment \_\_\_\_\_ Condominium \_\_\_\_\_ Home \_\_\_\_\_ Other: \_\_\_\_\_

Property Address: (CURRENT PROPERTY ADDRESS)

Monthly Rent (\$): \_\_\_\_\_ Beds (#): \_\_\_\_ Baths (#): \_\_\_\_ Square Feet (SF): \_\_\_\_\_

Lease Start: (MM/DD/YYYY) \_\_\_\_\_ Lease End: (MM/DD/YYYY) \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Landlord Name: \_\_\_\_\_

Landlord Email: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

**Previous Residence - 1**

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Monthly Rent (\$): \_\_\_\_\_ Beds (#): ☐ Baths (#): ☐ Square Feet (SF): ☐  
Lease Start: \_\_\_\_\_ Lease End: \_\_\_\_\_  
Reason for Moving: \_\_\_\_\_  
Landlord Name: \_\_\_\_\_  
Landlord Email: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

**Previous Residence - 2**

Property Type: ☐ Apartment ☐ Condominium ☐ Home ☐ Other: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Monthly Rent (\$): \_\_\_\_\_ Beds (#): ☐ Baths (#): ☐ Square Feet (SF): ☐  
Lease Start: \_\_\_\_\_ Lease End: \_\_\_\_\_  
Reason for Moving: \_\_\_\_\_  
Landlord Name: \_\_\_\_\_  
Landlord Email: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_

**Current Employer**

Company Name: \_\_\_\_\_ Employer's  
Address: \_\_\_\_\_  
Title/ Occupation: \_\_\_\_\_  
  
Gross Monthly Income: \$ \_\_\_\_\_ Start Date: (MM/DD/YYYY) \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_  
Supervisor Email: \_\_\_\_\_

**Previous Employer**

Company Name: \_\_\_\_\_ Employer's  
Address: \_\_\_\_\_  
Title/ Occupation: \_\_\_\_\_  
  
Gross Monthly Income: \$ \_\_\_\_\_ Start Date: (MM/DD/YYYY) \_\_\_\_\_  
Supervisor Name: \_\_\_\_\_ Supervisor Phone: \_\_\_\_\_  
Supervisor Email: \_\_\_\_\_

**Vehicle(s)**

Do you own a vehicle? ☐ Yes (describe below) ☐ No

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ Plate#: \_\_\_\_\_ State: \_\_\_\_\_

Do you own a second vehicle? ☐ Yes (describe below) ☐ No

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_

Color: \_\_\_\_\_ Plate#: \_\_\_\_\_ State: \_\_\_\_\_

**References**

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

Full Name: \_\_\_\_\_

Email: \_\_\_\_\_

**Background Information**

Have you ever been evicted or a defendant in an eviction action? ☐ Yes ☐ No

If yes, describe: (IF APPLICABLE) \_\_\_\_\_

Have you ever filed, or are you in the process of filing bankruptcy? ☐ Yes ☐ No

If yes, describe: (IF APPLICABLE) \_\_\_\_\_

Do you have any outstanding balances with past landlords? ☐ Yes ☐ No

If yes, describe: (IF APPLICABLE) \_\_\_\_\_

Have you ever been asked to move for a lease violation of any kind? ☐ Yes ☐ No

If yes, describe: (IF APPLICABLE) \_\_\_\_\_

Have you ever been convicted of a crime? ☐ Yes ☐ No

If yes, describe: (IF APPLICABLE) \_\_\_\_\_

## Consent & Acknowledgment

I hereby certify that I am at least 18 years of age and that all information given on this application is true and correct. I authorize the Landlord and its agents to obtain an investigative consumer credit report including, but not limited to, credit history, Office of Foreign Assets Control (OFAC) search, landlord/tenant court record search, criminal record search and registered sex offender search. I authorize the release of information from previous or current landlords, employers, bank representatives, and personal references. I agree to furnish additional credit and/or personal references upon request. I understand incomplete or incorrect information provided in this application may cause a delay in processing which may result in denial of tenancy. This investigation is for resident screening purposes only and is strictly confidential. I hereby hold Landlord and its agents free and harmless of any liability for any damages arising out of any improper use of this information.

Important information about your rights under the Fair Credit reporting Act:

- You have a right to request disclosure of the nature and scope of the investigation.
- You must be told if information in your file has been used against you.
- You have a right to know what is in your file, and this disclosure may be free.
- You have the right to ask for a credit score (there may be a fee for this service).
- You have the right to dispute incomplete or inaccurate information. Consumer reporting agencies must correct inaccurate, incomplete, or unverifiable information.

Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Avenue N.W., Washington D.C, 20580

In connection with my application for housing, I understand that the property owner/agent may obtain one or more consumer reports, which may contain public information, for the purposes of evaluating my application. These consumer reports will be obtained from one or more of the following consumer reporting agencies:

- Equifax, E.C.I.F., P.O. Box 740241, Atlanta, GA, 30374-0241, (800) 685-1111
- Trans Union, Regional Disclosure Center, 1561 Orangethorpe Ave., Fullerton, CA, 92631, (714) 738-3800
- Experian (TRW), Consumer Assistance, P.O. Box 949, Allen, TX, 75002, (888) 397-3742

These consumer reports are defined as investigative consumer reports. These reports may contain information on my character, general reputation, personal characteristics, and mode of living. In connection with my application for housing, I authorize owner/agent to obtain a consumer report from the consumer reporting agencies listed above.

**Application Fee:** \$40 per occupant over 18 years of age

Applicant's Signature: \_\_\_\_\_ Date: (MM/DD/YYYY) \_\_\_\_\_

Printed Name: \_\_\_\_\_