

Application for Occupancy (Page 1)

Haag Management Inc.

1020 Commercial Street Ste A (Office) -- Emporia, KS 66801

Cell/Text 620-341-9400 -- Fax 620-343-7691

haag@emporiarentals.com

www.emporiarentals.com

Property Information

Property Name _____	Projected: Unit Number _____	Rent \$ _____
Leasing Rep _____	Unit Type _____	Pet \$ _____
	Move-In Date _____	Garage \$ _____

Applicant Information

Single Married Separated

Last Name _____ First Name _____ Middle _____

Maiden or Former Names _____

SSN (Social Security Number) _____ Date of Birth _____

Email address _____ Cell Phone _____

DL State and # _____ Daytime Phone _____

Roommates Yes No Names of Roommates _____

SPOUSE

Last Name _____ First Name _____ Middle _____

Maiden or Former Names _____

SSN (Social Security Number) _____ Date of Birth _____

Cell Phone _____ DL State and #: _____

Residential Information

Include information for the last **3 years**. Use second page if needed.

PRESENT Rent Own Family Dates There _____ - _____ Rent \$ _____

Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Apartment/Landlord Name _____ Phone _____

PRIOR Rent Own Family Dates There _____ - _____ Rent \$ _____

Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Apartment/Landlord Name _____ Phone _____

OTHER Rent Own Family Dates There _____ - _____ Rent \$ _____

Street Address _____ Apt. # _____

City _____ State _____ Zip _____

Apartment/Landlord Name _____ Phone _____

Employment and Income Information

AAA Verify (For office use only)

Employer _____ Position _____ Monthly Income \$ _____

Address _____ City _____ State _____ Zip _____

Start Date _____ Supervisor Name _____ Phone _____

SPOUSE Employer _____ Position _____ Monthly Income \$ _____

Address _____ City _____ State _____ Zip _____

Start Date _____ Supervisor Name _____ Phone _____

Application for Occupancy (Page 2)

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Applicant Information (Please enter again in case Page 1 and Page 2 get separated)

Last Name _____ First Name _____ SSN _____

OTHER INCOME

Source of Income _____ Monthly Income \$ _____

(Such as Child Support, Alimony, Social Security, etc.)

Additional Information

Have you ever willingly refused to pay rent? _____ If so, to whom & why? _____

Have you ever been evicted? _____ If so, to whom & why? _____

Have you ever been arrested or convicted of a crime? _____ If so, where, when and what

Was the charge? _____

Does anyone in household have a disability that may require a reasonable modification or accommodation?

Yes No If yes, please explain: _____

Vehicle Make/ Model _____

License Plate # _____ Color _____

Vehicle Make/ Model _____

License Plate # _____ Color _____

Pets: Yes No 1st Breed & weight _____

2nd Breed & weight _____

Emergency Contact _____ Relationship _____ Phone _____

Occupant Information List all occupants residing in the household

Last Name _____ First _____ Middle _____

SSN (Social Security Number) _____ Date of Birth _____

Last Name _____ First _____ Middle _____

SSN (Social Security Number) _____ Date of Birth _____

Last Name _____ First _____ Middle _____

SSN (Social Security Number) _____ Date of Birth _____

Last Name _____ First _____ Middle _____

SSN (Social Security Number) _____ Date of Birth _____

Failure to provide complete information, including daytime phone numbers for you and your references, will delay processing. **Incomplete applications will not be processed.**

Thank you for your interest in our apartments.

After completing this application please drop off at

Haag Management Inc. Office, Mail, Fax, or Email to:

Haag Management Inc.

1020 Commercial Street Ste A (Office)

Emporia, KS 66801

Cell/Text 620-341-9400 -- Fax 620-343-7691

haag@emporiarentals.com

By signing, the applicant recognizes that an investigative report will be prepared whereby information is obtained from credit bureaus, landlords and employers, through interviews and public records. This inquiry includes information as to your character, general reputation, credit and mode of living. This application may be disapproved as a result of any misrepresentation or insufficient information as a result of an incomplete application.



Applicant's Signature _____ Date _____ Spouse's Signature _____ Date _____