

(PLEASE PRINT)

Application For Lease - Form 18-P
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CHICAGO BOARD OF REALTORS®



This is a legal document which imposes legal obligations on you and may under some circumstances result in forfeiture of your earnest money. Please read carefully.

Name of Applicant(s) _____ Date _____

Check One: Single
 Married 1. _____
 Divorced 2. _____
 Separated 3. _____

Names of All Children _____ Age _____ Will Occupy Apartment
 Yes No

Others Sharing Apartment—Names _____ Relationships _____

Your Present Home Address _____ City _____ Telephone _____

Eligible Apartment With _____

Present Owner/Agent _____

Address _____ City _____ Telephone _____

Previous Addresses For Last Four Years _____

Reasons for Moving from last address _____

List Pets _____

Automobile(s) Make _____ Year _____ License Number _____

APPLICANT _____ APPLICANT _____

Social Security No. _____ Social Security No. _____

Date of Birth _____ Date of Birth _____

Drivers License No. _____ Drivers License No. _____

Present Employer _____ Since _____ Present Employer _____ Since _____

Address _____ Address _____

Phone _____ Department Head _____ Phone _____ Dept. Head _____

Job Title _____ Job Title _____

Annual Income From Employer \$ _____ Annual Income from Employer \$ _____

Other Income: Source \$ _____ Other Income: Source \$ _____

Total Income From All Sources \$ _____ Total Income from All Sources \$ _____

Chk. Acct.: # _____ Chk. Acct.: # _____

Chk. Acct.: # _____ Chk. Acct.: # _____

Sav. Acct.: # _____ Sav. Acct.: # _____

Sav. Acct.: # _____ Sav. Acct.: # _____

REFERENCES Firm or Person Address Acct. No. Balance Monthly
Due Payments

Credit Cards: (Name two) & No. _____

Store Accts. (Name two) & No. _____

Other Credit Accounts and Debts. _____

Personal References: _____ Phone _____

Address _____ City _____ State _____ Zip _____

Personal Reference _____ Phone _____

Address _____ City _____ State _____ Zip _____

In Emergency, Notify Nearest Relative _____ Relationship _____

Address _____ Phone _____

INFORMATION OCCUPANCY (To be filled in by Agent/Owner)

Facilities Desired: Furnished Unfurnished Studio 1 bedroom 2 bedroom 3 bedroom other

Parking: no yes sheltered open; Space No. _____

Building Address _____ Apartment No. _____

Apt Security Deposit \$ _____ Key (etc.) Deposit \$ _____ Parking Deposit \$ _____

Lease Term From _____ To _____ Parking per mo. \$ _____

Reverse Section before filling in this side of Form.

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AUTHORIZATION TO CHECK CREDIT

In connection with your apartment application a consumer or credit reporting agency may be asked to make an investigative consumer or credit report on you.

I (we) understand and hereby authorize agent/owner and any consumer or credit reporting agency or bureau employed by it to investigate my (our) character, general reputation, mode of living, credit and financial responsibility and the statements made with the Application and to inquire and check with the persons and references named herein and also authorize(s) such credit or consumer reporting agency or bureau to make a consumer or credit report in connection therewith.

AGREEMENT and CAVEAT

TO AGENT/OWNER:

The undersigned hereby make an application for lease for the apartment and services described above and on the terms described above and deposit herewith the earnest money deposit and the credit report fee for checking and reviewing credit set forth above. The earnest money deposit is to be refunded to the undersigned unless this application is accepted within the number of days specified on the face of this application. The credit report fee is not refundable.

As an inducement to you to accept and process this application, the undersigned warrant that all matters set forth in this application are true and complete. If you accept this application within the time specified below (which acceptance shall occur on the day you deliver to the undersigned in person or deposit in the mail notice of the approved application) and then or thereafter deliver to the undersigned for execution a copy of _____ Apartment Lease Form _____ containing the above terms, the undersigned shall within _____ days

hereafter execute and deliver the same to you and deposit with you simultaneously the "Total Due if application accepted" as set forth on the face of this application. (The date of delivery of the lease to you will be the date the undersigned deliver it to you personally or deposit it in the mail to your office.) If the undersigned fail or refuse to deliver it to you within the said _____ period, the earnest money deposit made herewith is to be retained by you as liquidated damages, and there shall be no further liability on your part or that of the undersigned with respect to said proposed lease or this application.

You will have no obligation to prepare, execute or deliver a lease to the undersigned unless and until you have accepted this application in writing. The delivery to the undersigned of a lease form, whether or not the same contains the above terms, without the delivery of the written approval of this application shall not be an acceptance of this application.

Earnest Money Deposit \$ _____	First Month's Rent\$ _____
Credit Report Fee \$ _____	Security Deposit\$ _____
Total Paid \$ _____	Other\$ _____
Application Taken By _____	Total Due if Application accepted \$ _____

Copy Received By

Signature _____	Date _____
Signature _____	Date _____

Signed _____ Agent/Owner Date _____

TO: AGENT/OWNER

Call CBOR/ATS at 1(800) 888-1287 to screen prospective residents for credit, eviction, and employment records.

CHECK OFF LIST

	Insert Date		Insert Date
CBOR/ATS Tenant Screen Requested	_____	Move in date	_____
Submitted to Manager for approval	_____	Keys Submitted to Tenant	_____
Sent Applicant Notification	_____	No. of sets:	
Lease Typed	_____	Apt. _____	
Name Plate Ordered	_____	Mailbox _____	
Electric Form Sent	_____	Main Ent. _____	
Decorating Ordered	_____	Pool Tag No. _____	_____
(Also included Carpet Cleaning & Apartment Cleaning)		Garage Key Card No. _____	_____
		File Forwarded to Main Office _____	_____
		File Card Typed	_____