

TENANT SUMMARY INFORMATION

CURRENT DATE: _____
TIMING OF MOVE IN REQUESTED: _____
LOCATION/SUBDIVISION: _____
RENT AMOUNT: _____ BEDROOMS _____ BATHS _____
OTHER UNIQUE NEEDS:

REASON FOR MOVING:

APPLICANT: NAME _____ D.O.B. _____
SS# _____ DRIVER LICENSE# _____
CELL PHONE # _____ WORK PHONE _____
HOME PHONE _____
CURRENT ADDRESS _____
RENT OR OWN (circle one) LENGTH TIME AT LOCATION _____

LANDLORD NAME & PHONE _____
NUMBER OF YEARS AT THE ABOVE ADDRESS _____
PLACE OF EMPLOYMENT _____
ADDRESS _____ PHONE # _____
SUPERVISOR NAME _____ YEARS ON THE JOB _____
EMERGENCY CONTACT: NAME _____ PHONE# _____
RELATIONSHIP TO YOU: _____

CO-APPLICANT: NAME _____ D.O.B. _____
SS# _____ DRIVER LICENSE# _____
CELL PHONE # _____ WORK PHONE _____
HOME PHONE _____
CURRENT ADDRESS _____
RENT OR OWN (circle one) LENGTH TIME AT LOCATION _____
LANDLORD NAME & PHONE _____
NUMBER OF YEARS AT THE ABOVE ADDRESS _____
PLACE OF EMPLOYMENT _____
ADDRESS _____ PHONE # _____
SUPERVISOR NAME _____ YEARS ON THE JOB _____
EMERGENCY CONTACT: NAME _____ PHONE# _____
RELATIONSHIP TO YOU: _____

OTHER PEOPLE RESIDING WITH YOU

<u>NAME</u>	<u>D.O.B.</u>	<u>RELATIONSHIP</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

PETS YES / NO IF YES WHAT DESCRIBE _____
 ANY SMOKERS YES / NO _____

LUXOR HOMES AND ALL RELATED ENTITIES HAVE PERMISSION TO CONTACT ANY OF THE ABOVE SOURCES FOR VERIFICATION OF INFORMATION GIVEN. FALSE INFORMATION COULD LEAD TO TERMINATION OF LEASE.

APPLICANT SIGNATURE _____
 PRINTED NAME _____
 DATE _____

CO-APPLICANT SIGNATURE _____
 PRINTED NAME _____
 DATE _____