

**APPLICATION FOR LEASE**

820 Edgebrook Office  
DeKalb, IL 60116

Dwell DeKalb Realty  
\$20 Application Fee  
Cell +1-815-751-2546  
Fax +1-815-206-8254

DATE: \_\_\_\_\_

Please print

**PERSONAL INFORMATION**

Full Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Last First M.I.

Date of Birth: \_\_\_\_\_ Married \_\_\_\_\_ or Single \_\_\_\_\_ Driver's Lic. # \_\_\_\_\_

Present Address: \_\_\_\_\_  
Street Apt City State Zip

Permanent Address \_\_\_\_\_  
Street Apt City State Zip

Phone: (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_ Other states lived in: \_\_\_\_\_

**APARTMENT INFORMATION**

Property interested in: \_\_\_\_\_ Date Needed: \_\_\_\_\_ Number of bedrooms \_\_\_\_\_

How many persons will occupy this apartment (including self)? \_\_\_\_\_ (Please List Below)

\_\_\_\_\_  
Name Age Relationship Name Age Relationship

\_\_\_\_\_  
Name Age Relationship Name Age Relationship

Any Pets No \_\_\_\_\_ Yes \_\_\_\_\_ Type \_\_\_\_\_ Wt \_\_\_\_\_ Age \_\_\_\_\_

**EMPLOYMENT HISTORY**

Mark all if apply Student \_\_\_\_\_ Employed full time \_\_\_\_\_ Employed part time \_\_\_\_\_ Unemployed \_\_\_\_\_ Retired \_\_\_\_\_

Employer name: \_\_\_\_\_ Supervisors Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Employers Address: \_\_\_\_\_  
Street Apt City State: Zip

Position: \_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_ week / month / year

If Current Employment is less than one year, list previous employers and phone numbers:

Supervisors Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Other Sources of Income and Amounts \_\_\_\_\_

**Student Applicants Only**

School \_\_\_\_\_ Major \_\_\_\_\_ Year in School \_\_\_\_\_ Grade Point Average \_\_\_\_\_

Please provide copies of scholarships, financial aid loans, and proof of other valid income sources during the school year. If your parents/guardian are assisting you financially, please state above in "Other Sources of Income"

**RENTAL HISTORY**

Current Landlord: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Landlord's Address: \_\_\_\_\_  
Street Apt City State: Zip

How long at this address: \_\_\_\_\_ Amount of rent \_\_\_\_\_ Reason for moving \_\_\_\_\_

**If Current Landlord is less than two years, list previous landlord:**

Past Landlord \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address Rented: \_\_\_\_\_ Dates Rented: \_\_\_\_\_

Have you ever filed for bankruptcy? \_\_\_\_\_ Been evicted from tenancy? \_\_\_\_\_ Broke a lease \_\_\_\_\_

Late on your rent payments? \_\_\_\_\_ Refused to pay rent when it was due? \_\_\_\_\_

Been convicted of a felony? \_\_\_\_\_ Who referred you to Dwell DeKalb? \_\_\_\_\_

Who to contact in case of emergency: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Relationship \_\_\_\_\_ Address \_\_\_\_\_

**Credit History**

Credit Cards \_\_\_\_\_  
Name of Bank City

Checking Account: \_\_\_\_\_  
Name of Bank City

Do you have any account that are in collections?: \_\_\_\_\_

**SIGNATURES:**

I hereby authorize Owner/Agent to conduct any credit and background checks on me that the Owner/Agent deems appropriate.

X \_\_\_\_\_  
Applicant name (print) Applicant signature Date

**Verification of Residency/ Employment**

Phone # 815-751-2546

Fax # 815-756-8033

I hereby authorize my Landlord/ Employer and/or credit agency to disclose the information requested below to Dwell DeKalb Realty.  
I hereby authorize Owner/Agent to conduct any credit and background checks on me that the Owner/Agent deems appropriate.

X \_\_\_\_\_  
Applicant name (print)                      Applicant signature                      LAST 4 SS#

X \_\_\_\_\_  
Co-Applicant name (print)                      Co-Applicant signature                      LAST 4 SS#

**Please return the application to Dwell DeKalb Realty. We will contact your landlord/employer for further information.  
Thank you.**

*The below portion is to be filled out by Landlord/Employer*

From: Dwell DeKalb Realty

The applicant referenced above has applied for an apartment and has indicated you as their Landlord/ Employer. Please complete the following information and return it to us at your earliest convenience.

**I. Landlord    Address:** \_\_\_\_\_

1. Lease dates \_\_\_\_\_
2. Rent amount \$ \_\_\_\_\_ Security Deposit amount \$ \_\_\_\_\_
3. Number of late payments: \_\_\_\_\_
4. Number of NSF checks in last 12 months \_\_\_\_\_
5. Have any unauthorized persons lived in this unit? \_\_\_\_\_
6. Has this resident been found with a pet? \_\_\_\_\_ Is it permitted? \_\_\_\_\_
7. Have there been any noise problems? \_\_\_\_\_
8. Have the police been called regarding the applicant or guests? \_\_\_\_\_  
If yes please explain \_\_\_\_\_
9. Has the applicant or guests acted in a physically violent or verbally abusive manner toward neighbors or staff?  
If yes, please explain \_\_\_\_\_
10. Amount of security deposit refunded to tenant \$ \_\_\_\_\_ Please explain \_\_\_\_\_  
\_\_\_\_\_
11. 11. Would you rent to this resident again? \_\_\_\_\_
12. 12. Other problems?\_ie bed bugs \_\_\_\_\_
13. 13. Are you related to this applicant? \_\_\_\_\_ If yes, how? \_\_\_\_\_

**II. Employer                      Employee Name:** \_\_\_\_\_

1. Starting date \_\_\_\_\_ 2. Salary \_\_\_\_\_
3. Seasonal    Part time    Full time (please circle)- If part-time, how many hours/week? \_\_\_\_\_
4. Continued Employment expected? Yes No
5. Are you related to this applicant? \_\_\_\_\_ If yes, how? \_\_\_\_\_

**III. Landlord/Employer Thank you for your assistance!**

\_\_\_\_\_  
Signature    title    date