

ONE APPLICATION PLUS \$50 NON-REFUNDABLE APPLICATION FEE PER RESIDENT 18 YEARS OR OLDER IS REQUIRED.

LEASING INFORMATION

APPLICATION DATE	DESIRED MOVE IN DATE	DESIRED LEASE TERMS	DESIRED APARTMENT SIZE & TYPE	
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PERSONAL INFORMATION

FIRST NAME, MI, LAST NAME	SSN	DATE OF BIRTH		
EMAIL	HOME PHONE	CELL PHONE		

RESIDENTIAL HISTORY

CURRENT ADDRESS	CITY	STATE	ZIP CODE	
MOVE IN DATE	MOVE OUT DATE	LANDLORD NAME	LANDLORD PHONE	
REASON FOR LEAVING				
PREVIOUS ADDRESS	CITY	STATE	ZIP CODE	
MOVE IN DATE	MOVE OUT DATE	LANDLORD NAME	LANDLORD PHONE	
REASON FOR LEAVING				

EMPLOYMENT INFORMATION

CURRENT EMPLOYMENT STATUS:	<input type="checkbox"/> FULL-TIME	<input type="checkbox"/> PART-TIME	<input type="checkbox"/> STUDENT	<input type="checkbox"/> RETIRED	<input type="checkbox"/> NOT EMPLOYED
CURRENT (OR MOST RECENT) EMPLOYER	POSITION		APPROXIMATE MONTHLY INCOME		
SUPERVISOR	SUPERVISOR PHONE				
IF STUDENT, SCHOOL ENROLLED	CURRENT LEVEL OF SCHOOL		SOURCE FOR RENT		

ADDITIONAL FAMILY MEMBERS

NAME	RELATIONSHIP	PRIMARY PHONE			
CURRENT ADDRESS	CITY	STATE	ZIP CODE		
NAME	RELATIONSHIP	PRIMARY PHONE			
CURRENT ADDRESS	CITY	STATE	ZIP CODE		
DO YOU PLAN ON HAVING A PET?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, PLEASE LIST BREED AND WEIGHT		

EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT NAME (NOT A ROOMMATE)				
RELATIONSHIP	HOME PHONE	WORK PHONE	CELL PHONE	
ADDRESS	CITY	STATE	ZIP CODE	

CRIMINAL HISTORY

HAVE YOU EVER BEEN CONVICTED OF A CRIME?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, DESCRIBE AND INCLUDE DATE AND LOCATION
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REFERRAL

REFERRED BY

QUALIFICATION STANDARDS

- Combined monthly household income must be three times the amount of monthly rent.
- Must have a clean criminal history for every resident.

- Must agree to policies and rules listed with the Lease Agreement.
- Must be able to submit Security Deposit at time of Lease Agreement signing.
- Must complete all sections of Tenant Application.

- Must have a positive reference from past rental properties.
- Must meet/maintain occupancy levels as stated in Lease Provisions.

I certify that the information contained in this application is true and correct. I authorize Landlord to contact any reference listed. I understand that a unit is not considered secured until the landlord receives a deposit and signed lease agreement. Deposit checks will be cashed immediately upon receipt. I understand that in the event no verifiable rental history is available or inferior rental history is found, I may be required to increase my deposit to an amount equal to two months' rent. Once approved, I agree to execute a lease before possession is given.

APPLICANT SIGNATURE	DATE
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RETURN TO: 600 NW CHERRY CREEK LANE, ANKENY, IA 50023 | PIPER@BRICKTOWNLIVING.COM

APPLICANT INFORMATION			
FIRST NAME, MI, LAST NAME		DATE	
CURRENT ADDRESS	CITY	STATE	ZIP CODE

PROPERTY MANAGEMENT / LANDLORD INFORMATION		
PROPERTY / COMMUNITY NAME	MANAGER / AGENT NAME	PHONE NUMBER

AUTHORIZATION	
I authorize JPM, INC., its subsidiaries, or its managing agents to investigate my rental history. The investigation may include, but is not limited to the questions listed below.	
APPLICANT SIGNATURE	DATE

OFFICE USE ONLY			
MOVE IN DATE	MOVE OUT DATE	DID RESIDENT PAY THEIR RENT ON TIME? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NO. OF TIMES RENT WAS DELINQUENT	MONTHLY RENT (\$)	SECURITY DEPOSIT (\$)	SECURITY DEPOSIT RETURNED (\$)
DAMAGE TO PROPERTY			
LEASE VIOLATIONS			
RESIDENT EVICTED? <input type="checkbox"/> YES <input type="checkbox"/> NO	REASON FOR LEAVING		
WOULD YOU RENT TO THIS PERSON AGAIN? <input type="checkbox"/> YES <input type="checkbox"/> NO	ADDITIONAL COMMENTS		
SIGNATURE		DATE	
COMPANY		TITLE	

