



Jacobs Realty, Inc. Property Management
 33 E. Broadway, Ste. 100 Columbia, MO 65203
 phone: (573) 449-2558 fax: : (573) 449-0431

Application

Please Print all information

Please help us to expedite the processing of your application by providing all of the information requested below. It will be treated as confidential and retained in your personal file.

\$35.00 non-refundable application fee required per person.

▶▶▶ IF NOT UNDERSTOOD SEEK COMPETENT ADVICE! ◀◀◀

OFFICE USE ONLY: APPLICATION FEE RECEIVED BY _____

How did you hear about us?

- Referred by current resident (If so, please fill in their name and current address)
-
- Facebook Apartment Finder Signs in yards TV Commercial
 Craigslist Off Campus Housing Fair Other _____

Applicant's Personal Information

Name		Middle Initial
Phone Number	Email	
Drivers License Number	Social Security Number	

College/University Information (if applicable)

Institution Attending	
Year	<input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Grad Student <input type="checkbox"/> PhD Student
Fraternity/Sorority Affiliation	
Chapter President	Contact Phone Number

Employment Information

Present Employer		Phone Number
Type of work		Supervisor
Employment Dates from	to	Gross Monthly Income
Previous Employer		Phone Number
Type of work		Supervisor
Employment Dates from	to	Gross Monthly Income

Identify any other source of income (Please indicate amount per month.)

Scholarships \$	Alimony \$
Parental Support \$	Name & Phone Number
Other \$	Child Support \$

Present Address Information

Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Address	
Lived here from	to	Monthly Rent Payment \$
Landlord Name	Landlord Phone Number	
Reason for leaving		

Previous Address Information

Check One: <input type="checkbox"/> Rent <input type="checkbox"/> Own	Address	
Lived here from	to	Monthly Rent Payment \$
Landlord Name	Landlord Phone Number	
Reason for leaving		

Please see reverse side

Other Occupant Information (Anyone other than yourself to occupy the apartment)

Name	Relation
Name	Relation
Name	Relation

Pets

All animals listed below are subject to approval and all associated pet fees/deposits. To expedite pet approval process, please provide a copy of your pet's most recent vaccination record and confirmation of all information listed below from your veterinarian. (Max. 3)

Type	Breed	Age	Weight
Type	Breed	Age	Weight
Type	Breed	Age	Weight

Armed Forces Personnel (if applicable)

Branch of Service	Location of Station		
Rank	Serial #	Squadron	Phone

Have you: (Check all that apply)

- Filed for Bankruptcy
 Had Prior Eviction
 Willfully Withheld Rent
 Any Criminal Convictions

If yes, please explain

To Notify in case of an emergency

Nearest Relative Name	Relation
Phone Number	Other Number
Address	
Other Contact Name	Relation
Phone Number	Other Number
Address	

Applicant(s) understands and acknowledges that, as part of normal processing procedures, an investigative consumer report may be obtained, typically containing information as to my/our credit history and worthiness. This application is preliminary only and does not obligate owner and/or owner's representative to execute a lease or deliver possession of the proposed premises. Owner and/or Owner's representative are pledged to the spirit of the U.S. Policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status, or national origin.

EACH APPLICANT AGREES AND REPRESENTS THAT:

- A. ALL OF THE ABOVE STATEMENTS ARE TRUE AND COMPLETE AND HEREWITH AUTHORIZES VERIFICATION OF ABOVE INFORMATION, REFERENCES, AND CREDIT RECORDS, APPLICANT ACKNOWLEDGES THAT THE INCLUSION OF ANY FALSE INFORMATION HEREIN SHALL CONSTITUTE GROUNDS FOR REJECTION OF THIS APPLICATION. TERMINATION OF ANY RENTAL AGREEMENT AND RIGHT OF OCCUPANCY, AND/OR FORFEITURE OF APPLICATION DEPOSITS.
- B. THE ACTUAL DATE OF POSSESSION IS SUBJECT TO VACATION OF PREMISES BY PRIOR TENANT, IF ANY, AND COMPLETION OF NECESSARY REPAIRS OR REMODELING.
- C. APPLICANT(S) IS NOT PRESENTLY RENTING ANY RESIDENCE IN A NAME OTHER THAN THAT LISTED ABOVE.
- D. IN THE EVENT APPLICANT LISTS PARENTAL SUPPORT, APPLICANT AUTHORIZES LESSOR TO VERIFY SUCH INFORMATION AND IN THE EVENT A LEASE IS SIGNED BETWEEN THE PARTIES, LESSEE AUTHORIZES LESSOR TO NOTIFY PARENTS OF ANY VIOLATIONS OF SAID LEASE AGREEMENT.
- E. UNTIL LESSOR EXECUTES AND TENDERS A LEASE TO APPLICANT (S), LESSOR SHALL HAVE THE RIGHT TO REJECT THE APPLICANT(S) FOR WHATEVER REASON.

If applicant(s) withdraw(s) the application prior to lease signing, Lessor will retain all monies paid towards the security deposit as liquidated damages.

Signature of Applicant: _____ **Date** _____

Application received by Lessor
Jacobs Realty, Inc., Agent for Owner _____ **Date** _____