



Markwood Realty, LLC Rental Application

Email to: fbksrealty@ymail.com

or Fax to: 907-374-0342

ADDRESS _____ APARTMENT NO. _____
A \$40.00 application fee will be assessed per household if application is accepted-Payable at time of lease signing

Apartment Occupants

Name (Head of Household)	Birth Date	1. <input type="checkbox"/> Male 2. <input type="checkbox"/> Female	Marital Status 1. <input type="checkbox"/> Married 2. <input type="checkbox"/> Separated	3. <input type="checkbox"/> Divorced 4. <input type="checkbox"/> Widowed	5. <input type="checkbox"/> Single	S.S. No.
Phone Number			Email Address			

Other Occupants (Including Children)

Name A	1. <input type="checkbox"/> Male 2. <input type="checkbox"/> Female	Birth Date	Relationship	1. <input type="checkbox"/> Spouse 2. <input type="checkbox"/> Child 3. <input type="checkbox"/> Roommate 4. <input type="checkbox"/> Other
Name B	1. <input type="checkbox"/> Male 2. <input type="checkbox"/> Female	Birth Date	Relationship	1. <input type="checkbox"/> Spouse 2. <input type="checkbox"/> Child 3. <input type="checkbox"/> Roommate 4. <input type="checkbox"/> Other
Name C	1. <input type="checkbox"/> Male 2. <input type="checkbox"/> Female	Birth Date	Relationship	1. <input type="checkbox"/> Spouse 2. <input type="checkbox"/> Child 3. <input type="checkbox"/> Roommate 4. <input type="checkbox"/> Other

Present Address

Street	City	State	Phone of Landlord	Landlord
Move In Date	Move Out Date	Rental Rate	Deposit Amount	Did You Receive Deposit Back?

Previous Address

Street	City	State	Phone of Landlord	Landlord
Move In Date	Move Out Date	Rental Rate	Deposit Amount	Did You Receive Deposit Back?

IN CASE OF EMERGENCY – NOTIFY:

Name	Address	City/State	Phone	Relationship
------	---------	------------	-------	--------------

PRIMARY OCCUPATION OF HEAD OF HOUSEHOLD (check one)

- | | | |
|---|--|---|
| 1 <input type="checkbox"/> Professional
(Charges fees, i.e., Doctor, Lawyer, etc.) | 3 <input type="checkbox"/> White Collar | 7 <input type="checkbox"/> Un-skilled laborer |
| 2 <input type="checkbox"/> Semi-Professional
(Salaried technicians, etc.) | 4 <input type="checkbox"/> Sales representative | 8 <input type="checkbox"/> Retired |
| | 5 <input type="checkbox"/> Skilled laborer (plumber, electrician, etc.) | 9 <input type="checkbox"/> Not employed |
| | 6 <input type="checkbox"/> Semi-skilled laborer (job requires some training) | A <input type="checkbox"/> Student |

TOTAL ANNUAL INCOME OF HEAD OF HOUSEHOLD:

- | | | | |
|--|--|--|--------------------------------------|
| <input type="checkbox"/> 5,999 – 9,999 | <input type="checkbox"/> 20,000 – 39,999 | <input type="checkbox"/> 60,000 – 79,999 | <input type="checkbox"/> 100,000 – + |
| <input type="checkbox"/> 10,000-19,999 | <input type="checkbox"/> 40,000 – 59,999 | <input type="checkbox"/> 80,000 – 99,999 | |

EMPLOYMENT

Name of Current Employer		Address	How Long?	Bus. Phone
Supervisors Name		Supervisors Phone Number	Pay Rate	Rank/Grade/Squad Info
Former Employer		Address	How Long?	Bus. Phone
Supervisors Name		Supervisors Phone Number	Pay Rate	Reason For Leaving?
Spouse Work Yes No	Occupation	Address	How Long?	Bus. Phone

REFERENCES

BANK(S)	A	Name	Address	City	Type of Account(s) 1 <input type="checkbox"/> Checking 2 <input type="checkbox"/> Savings 3 <input type="checkbox"/> Loan
	B	Name	Address	City	Type of Account(s) 1 <input type="checkbox"/> Checking 2 <input type="checkbox"/> Savings 3 <input type="checkbox"/> Loan
CREDIT	A	Name	Address	City	Type of Business
	B	Name	Address	City	Relationship
PERSONAL	A	Name	Address	City	Relationship
	B	Name	Address	City	Relationship

AUTOS

- 0 None
 1 One Year _____ Make _____ License _____
 2 Two Year _____ Make _____ License _____
 3 More than two

OTHER:

- 1 Boat
 2 Camper
 3 Motorcycle
 4 Bicycle
 5 Other _____
- Dr. Lic. No _____ State _____ Exp. _____
 Number of Pets: _____ Type: _____ Breed _____
 Type: _____ Breed _____

INSURANCE: Owner and Agent carry no insurance on the personal property of tenants.
It is recommended that you obtain same.

CREDIT: I hereby authorize the Landlord/Property Manager to do a credit check for the purpose of this rental application.

ENTIRE AGREEMENT: I understand that I acquire no rights to an apartment until I have signed a Rental Agreement and paid a Security Deposit. In signing this application, if a fee is collected at time of Application, it is hereby acknowledge that it is a non-refundable application fee and does not guarantee my acceptance of a rental agreement.

Applicant

Applicant

Date

Date