



Markwood Realty, LLC Rental Application

Return Application to:
565 University Avenue, Suite 3 (drop box at door)
Email to: cheryl@fbksrealty.com
Fax to: 907-374-0342

ADDRESS _____ UNIT NO. _____

A \$40.00 application fee will be assessed per application if accepted-Payable at time of lease signing

Apartment Occupants (If more than one person on Lease than an application is required for each Lease Signer)

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	
Phone Number			Email Address			
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	
Phone Number			Email Address			
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	
Phone Number			Email Address			

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
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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 | <input type="checkbox"/> 100,000 – + |

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 Checking 2 Savings 3 Loan
	B	Name	Address	City	Type of Account(s) 1 Checking 2 Savings 3 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 _____
- Number of Pets: _____ Type: _____ Breed _____
 Type: _____ Breed _____

Drivers License. No _____ State _____ Exp. _____

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

Date

Applicant

Date