## Moix Property Management 1213 Collier Drive Conway, AR 72032 501-327-2255

The undersigned herby make	s this applicati	ion to rent:			
Applicant:					
Full Name:			Contact Number:		
Social Sec. Number: _		Date of Birth	h:		
		Driver's license, State and #			
Co-applicant:					
Full Name:			Contact Number:		
Social Sec. Number: _					
			ate and #		
Other Occupants:					
Name:	DOB:	SS#:	Relationship:		
			Relationship:		
Name:	DOB:	SS#:	Relationship:		
			Relationship:		
Rental History:					
Current Address:					
			Date out:		
	Landlord's Phone Number:				
Reason for moving:					
Previous Address:					
			Date out:		
Previous Landlord:					
Reason for moving:					
In case of an emergency:					
Contact:			Phone number:		
Contact: Address:			Relationship:		
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## **Employment:**

Applicants Employer:	Superviso	or's name:			
Phone number:	_ [ ] full time [ ] part time [ ] retired				
Dates employed: From to _					
Pay per month:					
Co-Applicants Employer:	Superviso	r's name:			
Phone number:	[ ] full time [ ] part time [ ] retired				
Dates employed: From to _	Job title:				
Pay per month:					
Bank References:					
Checking Account Bank Name: Savings Account Bank Name:					
Vehicles:					
Year/Make/Model					
Year/Make/Model	Color	_ Plate #			
Personal References:					
Name:	Phone Number:				
Address:	Relationship:				
Name:	Phone Number:				
Address:	Relationship:				
Name:	Phone Number:				
Address:					

**Credit/Criminal:** I hereby consent to allow Owner and/or its designated agents to obtain a consumer credit report and criminal record information for the purpose of determining whether to lease a unit to me. I also agree and understand that Owner and/or its agents may obtain additional consumer credit reports and criminal records on me in the future to update or review my account. Upon my request, Owner and/or its agents or employees will tell me whether consumer credit reports or criminal record reports were requested and the names and addresses of consumer reporting agency that provided such reports.

**Insurance:** Owner and Agent carry no insurance on the Personal Property of tenants. IT IS RECOMMENDED THAT YOU OBTAIN INSURANCE COVERAGE.

**Security Deposit:** All money deposited with this application will be held as a security deposit. This security deposit will not be refunded if applicant's credit and references are approved by Agent and

Applicant decides not to rent the dwelling reserved for applicant. All of the security deposit will be refunded if the Applicant's credit and references are not approved by Agent.

**Entire Agreement:** The foregoing constitutes the entire agreement between the parties and may be modified only by written notice signed by both parties. This agreement is predicated upon all of the information which has been furnished by applicant being accurate. If the facts provided are not accurate, the ensuing lease agreement may be voided at the option of owner. Execution of this agreement by both parties to this agreement constitutes acceptance thereof.

**References:** I hereby authorize any and all parties to release information regarding my rental history to Moix Property Management in connection with this application.

Applicant:	Co-Applicant:
Date:	Date:

For Office Use Only:		
[] Approved [] Denied _		
Address:		
Move In Date:	Deposit:	Rent amount: