

# STUDENT HOUSING MANAGEMENT

4600 Mason-Montgomery Rd. • Mason, OH 45040  
www.StudentHousingMgmt.com

## LEASE APPLICATION

(Please Print)

Date: \_\_\_\_\_

Property address of apartment you are applying for: \_\_\_\_\_ Apt.# \_\_\_\_\_

Name: (Last) \_\_\_\_\_ (First) \_\_\_\_\_ (Middle) \_\_\_\_\_

Social Security No: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Driver's License No: \_\_\_\_\_

### **Present Address:**

Address: \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How Long? \_\_\_\_\_ Telephone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

Present Landlord: (Name) \_\_\_\_\_ (Address) \_\_\_\_\_ (Phone) \_\_\_\_\_

Reason for moving: \_\_\_\_\_

Occupancy Dates Requested: \_\_\_\_\_ Number to Occupy Premises: \_\_\_\_\_

If more than 1 occupant, please list names of other applicants: **(each occupant must complete a separate application)**

\_\_\_\_\_  
\_\_\_\_\_

### **Employment:**

Current Employer: (Name) \_\_\_\_\_ (Address) \_\_\_\_\_ (Phone) \_\_\_\_\_

Job Title: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_ Telephone No. \_\_\_\_\_

Length of Employment: \_\_\_\_\_ Current Monthly Income: \$ \_\_\_\_\_ Other Monthly Income: \$ \_\_\_\_\_

Bank Name: \_\_\_\_\_ Bank Address: \_\_\_\_\_ Account No: \_\_\_\_\_

### **Emergency Contact:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

### **Student Information:**

School Level at Occupancy Date: \_\_\_\_\_ Is rent dependent on financial aid? \_\_\_\_\_

### **Personal References:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Have you ever been evicted from a house or apartment? \_\_\_\_\_

I hereby authorize agents or employees of MIAMI PROPERTIES to check all information including credit references listed on this application. I understand that this would be done for the purpose of qualifying to rent property owned or managed by MIAMI Properties.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Email Address

*Please mail completed form to the above address.*