

**RENTAL/LEASE OPTION APPLICATION**

Date \_\_\_\_\_

Send completed application and a money order for \$25.00 to : **JMJ Real Estate Services, LLC.**  
**1910 St. Joe Ctr. Road, #34, Fort Wayne, IN 46825**  
**Office 260-440-7443 Fax 800-706-3479**

You may also drop the completed application and money order off at our office at the following address:  
**1910 St. Joe Ctr. Road, #34**  
**Fort Wayne, IN 46825-5000**

**Please print clearly. Incomplete applications will be denied.**

**Applicant Information:**

Applicant's full name \_\_\_\_\_ Soc Sec # \_\_\_\_\_ DOB \_\_\_\_\_  
Marital Status: Single\_\_ Married\_\_ Separated\_\_ Present Address \_\_\_\_\_ Zip \_\_\_\_\_ Phone # \_\_\_\_\_  
How long at present address: Years \_\_\_\_ Months \_\_\_\_\_ Currently Rent \_\_\_\_\_ Contract \_\_\_\_\_ Own \_\_\_\_\_ Current Payment \_\_\_\_\_  
Reason for moving \_\_\_\_\_ E-mail Address: \_\_\_\_\_  
How did you here about this property or the company? \_\_\_\_\_  
Have you given notice to current Landlord? \_\_\_\_\_

**Co-Applicant must complete separate application!**

List below everyone that will be living at the premises you are applying for. Include age if under 18 years old.

Name _____	Relationship _____	List any Pets that You Have: Age of Pet
_____	_____	_____
_____	_____	_____
_____	_____	_____

**Other People Living in Household:**

Name & Relationship _____	Soc Sec# _____	DOB _____
Name & Relationship _____	Soc Sec# _____	DOB _____
Name & Relationship _____	Soc Sec# _____	DOB _____
Name & Relationship _____	Soc Sec# _____	DOB _____

**Previous Rental Experience:** Name your two most recent landlords. Relatives may not be used as previous landlords.

Name \_\_\_\_\_ Phone \_\_\_\_\_ When rented \_\_\_\_\_  
Address of property you rented \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_ When Rented \_\_\_\_\_  
Address of property you rented \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

Have you ever been evicted or asked to leave a rental unit? Yes / No If yes, Why? \_\_\_\_\_

Have you ever been court evicted? Yes / No If yes, Why? \_\_\_\_\_

Emergency Health Contact \_\_\_\_\_ Address \_\_\_\_\_  
Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

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**Automobiles you own:**

Vehicle # 1 Make/Model \_\_\_\_\_ License number \_\_\_\_\_  
Vehicle # 2 Make/Model \_\_\_\_\_ License Number \_\_\_\_\_  
Your drivers license number \_\_\_\_\_ State registered in \_\_\_\_\_

**Applicant's Employment:**

Current Employer \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_  
Job title \_\_\_\_\_ Years employed \_\_\_\_\_ Monthly take home pay \$ \_\_\_\_\_  
Full Time \_\_\_\_\_ Part Time (less than 32 hrs/week) \_\_\_\_\_  
Supervisor \_\_\_\_\_

Previous Employer \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Phone \_\_\_\_\_  
Job Title \_\_\_\_\_ Years employed \_\_\_\_\_ Monthly take home pay \$ \_\_\_\_\_  
Full Time \_\_\_\_\_ Part Time (less than 32 hrs/week) \_\_\_\_\_  
Supervisor \_\_\_\_\_

Other Sources of income \_\_\_\_\_ Monthly amount \$ \_\_\_\_\_  
Other Sources of income \_\_\_\_\_ Monthly amount \$ \_\_\_\_\_

In the event of some emergency that would prevent you from paying rent, is there a relative, person, or agency that could assist you with rent?

Emergency Rental Contact \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

### Applicant Asset Information

Bank Name & Branch \_\_\_\_\_ City \_\_\_\_\_  
Checking or Savings Account# \_\_\_\_\_ Checking balance \_\_\_\_\_ Savings Balance \_\_\_\_\_  
Number of years account active: (C) \_\_\_\_\_ (S) \_\_\_\_\_ Retirement, 401K, Stock Balances \_\_\_\_\_  
Credit card references: Bank and address \_\_\_\_\_

### Applicant Credit Card or Loan Information (e.g. bank, department store, gas card, student loan, finance co.)

Automobile financed through: \_\_\_\_\_ Account# \_\_\_\_\_ Phone \_\_\_\_\_  
Monthly Payment \_\_\_\_\_

#### Credit Cards

Creditor: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct. # \_\_\_\_\_  
Total Amount Owed: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Credit limit \_\_\_\_\_  
Are your payments current? Y / N

Creditor: \_\_\_\_\_ Phone: \_\_\_\_\_ Acct. # \_\_\_\_\_  
Total Amount Owed: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_ Credit limit \_\_\_\_\_  
Are your payments current? Y / N

List approximate amounts of any other current monthly expenses:

Cable/Satellite TV: \_\_\_\_\_ Medical Payment: \_\_\_\_\_ Health Insurance: \_\_\_\_\_  
Auto Insurance: \_\_\_\_\_ Tuition \_\_\_\_\_ Renter's Insurance: \_\_\_\_\_  
Child Care: \_\_\_\_\_ Other: \_\_\_\_\_ Amount: \_\_\_\_\_

### Personal/Professional References

Personal reference or name of nearest living relative: \_\_\_\_\_ Address \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Name of Doctor: \_\_\_\_\_ Address \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Professional Reference: (e.g. attorney): \_\_\_\_\_ Address \_\_\_\_\_  
City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

#### Preferred method of "Worry-Free" standard rental payments:

Electronic banking \_\_\_\_\_ Payroll Deduction \_\_\_\_\_ Check \_\_\_\_\_ Money Order \_\_\_\_\_

#### Preferred rental due date:

Standard Plan (Monthly) \_\_\_\_\_ or Payday Plan ( bi-weekly/weekly) \_\_\_\_\_  
Please note there are extra charges for the Payday Plan

### Miscellaneous Information

How long do you plan on living in the next rental home that meets your needs? \_\_\_\_\_  
Would you like to receive a rental gift on your anniversary date as part of a 3-Star Resident Program? \_\_\_\_\_  
Would you like to buy a home within the next 3 years? \_\_\_\_\_  
Do you smoke? \_\_\_\_\_

#### Check the following items you currently own:

Liquid-filled furniture \_\_\_\_\_ Plunger \_\_\_\_\_ Lawn Mower \_\_\_\_\_ Refrigerator \_\_\_\_\_ Stove \_\_\_\_\_  
Washer \_\_\_\_\_ Dryer \_\_\_\_\_ Other appliances \_\_\_\_\_

**Have you ever:**

Broken a lease? \_\_\_\_\_ Refused to pay rent for any reason? \_\_\_\_\_  
Filed for bankruptcy? \_\_\_\_\_ Been convicted of a crime? \_\_\_\_\_  
Will you give us permission to do a criminal background check? \_\_\_\_\_  
Is there anything to prevent you from placing utilities in your name? \_\_\_\_\_  
Do you know of anything or any reason that may interrupt your ability to pay rent? \_\_\_\_\_

**Property Information**

Address of housing you are applying for: \_\_\_\_\_  
If not a specific house, what location of town are you interested in \_\_\_\_\_ Price Range \_\_\_\_\_  
# of Bedrooms \_\_\_\_\_ Square Footage \_\_\_\_\_  
Option Consideration Amount you can afford \_\_\_\_\_ Monthly rent you can afford \_\_\_\_\_

**Referral Reward Program**

Our company offers a referral reward program for residents who recommend anyone to us who decides to rent a separate unit from us. Please give the name and phone number of a friend, relative or co-worker who may be interested in renting. We will contact that person to inquire about applying for and renting one of our other homes or apartments.

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Agreement and Authorization**

**This is only a rental application and not a rental contract. This application is preliminary only and involves no obligation of the owners or its agents to approve this application or to deliver occupancy of the proposed premises. I hear by give my permission to use the information contained herein for any credit inquiry, employment verification, history of occupancy, criminal reports or other means to consider me as a Tenant or Lease Option candidate. I verify that all information contained in this form submitted by me is true. I understand that if I give false information on this application, if accepted, could result in lease termination and forfeiture of all deposits. Failure to take possession of property after acceptance will result in forfeiture of all deposits as liquidated damages. I understand that the application fee of \$25.00 to be paid to JMJ Real Estate Services, LLC with this application for credit evaluation and evaluation of tenancy or acceptance into the Lease Option program is non-refundable. Credit inquiry and evaluation will be conducted through AOA Tenant Screening Company, 6445 Sepulva Blvd., Suite 300, Van Nuys, CA 91411.**

**BY TYPING YOU NAME BELOW YOU ARE ACKNOWLEDGING AND AGREEING TO THE TERMS AND CONDITIONS OF THIS APPLICATION AS SO STATED UPOVE AS AN ELECTRONIC SIGNATURE**

**Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_**

## Items To Bring With Application

We will make copies of these items so that you may keep the originals.

Please provide each of the items listed below that applies to your situation. If it is not documented, it will not count as income.

1. \_\_\_\_\_ Last two paycheck stubs
2. \_\_\_\_\_ Child Support declaration and payment history
3. \_\_\_\_\_ Disability payment documentation or last two pay stubs
4. \_\_\_\_\_ Social Security payment documentation
5. \_\_\_\_\_ Driver's License
6. \_\_\_\_\_ Completed application for each adult over 18 that will be living in the home
7. \_\_\_\_\_ \$25.00 per application for each adult over 18 that will be living in the home
8. \_\_\_\_\_ Documentation of any additional government support you are receiving

**Please Note: You will be required to provide proof of renter insurance with JMJ Real Estate Services, LLC listed as an additional insured on the policy with the liability coverage to exceed \$100,000 before moving into a home.**