

Coffman Apartments

1100 S. Fort Thomas

Fort Thomas Ave.

859-441-8090

Rental Application

For: _____

Property Located At

Thank you for applying to rent with us. Please provide us with all of the information requested below. Incomplete information will only delay processing of your Rental Application.

Full Name: _____

Current Address: _____

Current Landlords Name: _____

Current Landlords Phone Number: (H)_____ (W)_____ (C)_____

Current Landlords Address: _____

Your:

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

How Long You Have Lived There: _____

Reason for Leaving: _____

Previous Address: _____

Landlords Name: _____

Landlords Phone Number (H)_____ (W)_____ (C)_____

Landlords Address: _____

Driver's License # / State: _____ Date of Birth: _____

S.S. #: _____

Current Employer: _____ Date Employed: _____

Position: _____

Gross Monthly Salary (from all sources): _____

Supervisor: _____ Supervisor's Phone #: _____

Bank Name: _____ Checking Account #: _____

Bank Name: _____ Savings Account #: _____

Spouse Full Name: _____

Current Address: _____

Current Landlords Name: _____

Current Landlords Phone Number: (H)_____ (W)_____ (C)_____

Current Landlords Address: _____

Your:

Daytime Phone: _____ Home Phone: _____

Cell Phone: _____ Work Phone: _____

How Long You Have Lived There: _____

Reason for Leaving: _____

Previous Address: _____

Landlords Name: _____

Landlords Phone Number (H)_____ (W)_____ (C)_____

Landlords Address: _____

Driver's License # / State: _____ Date of Birth: _____

S.S. #: _____

Current Employer: _____ Date Employed: _____

Position: _____

Gross Monthly Salary (from all sources): _____

Supervisor: _____ Supervisor's Phone #: _____

Bank Name: _____ Checking Account #: _____

Bank Name: _____ Savings Account #: _____

Other Occupants:

_____ Age: _____ Relationship: _____
_____ Age: _____ Relationship: _____
_____ Age: _____ Relationship: _____
_____ Age: _____ Relationship: _____

If both parents work or there is only one (1) parent with child/children, who is responsible for the child/children while the parent(s) are at work? _____

These premises shall be used solely by Applicant as a **single-family** resident.

Any other tenants / occupants must be approved by Coffman Apartments.

Do you have any of the following:

Pets: _____ Water-filled Furniture: _____

Automobiles/Motorcycles/Boats/Campers that you own and wish to keep on this property

Model: _____ Year: _____ License #: _____

Model: _____ Year: _____ License #: _____

Model: _____ Year: _____ License #: _____

Do you have any allergies including but not limited to smoke: Yes _____ No _____

If yes, please explain: _____

Do you or anyone in your household have any special needs? Yes _____ No _____

If yes, please explain: _____

Have you ever been delinquent in payment of your rent or any other financial obligations?

Yes _____ No _____

If yes, please explain: _____

Have you ever been convicted for a felony? Yes _____ No _____

If yes, please explain: _____

Have you ever been a defendant in a forcible detainer (eviction) lawsuit or defaulted (failed to perform) any obligation of any rental agreement or lease? Yes _____ No _____

If yes, please explain: _____

Other Personal References:

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

Name: _____ Address: _____ Phone: _____

In Case of Emergency Please Notify:

Name: _____ Address: _____

Phone: (H) _____ (W) _____ (C) _____

Relationship: _____

Name: _____ Address: _____

Phone: (H) _____ (W) _____ (C) _____

Relationship: _____

Name: _____ Address: _____

Phone: (H) _____ (W) _____ (C) _____

Relationship: _____

Name: _____ Address: _____

Phone: (H) _____ (W) _____ (C) _____

Relationship: _____

I/we certify that the information on this application is true and accurate to the best of my/our knowledge. I hereby authorize John Coffman Sr, John Coffman Jr, Deborah Koester or their agents to verify the above information and obtain a consumer credit report on each of the applicants. There is a \$25 fee for each adult applicant for the credit check. Husband and wife may do a joint credit check.

All Applicants please sign below:

Applicant: _____ Date: _____

Applicant: _____ Date: _____

Applicant: _____ Date: _____

Applicant: _____ Date: _____