

(Application Fee - \$20.-per Applicant or \$25. Per married couple (Non-Refundable)

The application fee is to be paid in separate payment from the deposit.

(Copy of Photo ID)

TENANCY APPLICATION

20

	-		, =0	-
Address of Property				
Monthly Tenancy \$	Possession Needed			_
	CONFIDENTIA	L REPORT		
Full Name of Applicant	1 (0 (1 1)			
Date of Birth	Age (Optional)_	Social Security	y No	
Spouses Full Name	Da	ite of Birth	Age (opt	cional)
Social Security No. of Spou	se			
Other Family Members &	Ages			
Current Phone	Email Address:_			
Present Address				
City	, State	, ZIP	Zip	
Date From:	Date To:	Amou	nt of Rent:_	
Present Landlord's Name_	Phone:			
Address				
City	State	Zip		
Reason For Moving				
Have you ever been evicted	? Do you o	we any unpaid re	nt?	
Last Previous Address				
Last Previous Address City	State	Zip		
Last Previous Landlord	t Previous Landlord		Phone	
Date From:	Date to:	Amo	ount of Rent:	
Present Occupation (Position	on and Title)			
Applicant Employed by			For	Vears
Employer's Address		Pł	 10ne	
1 /				
Applicant's Gross Income S	per	month.		
Spouse's Employment			For	Year
Spouse's Employer's Addre	ess	Ph		
	per mo			

Do you or your spouse receive gov't payme	nts?	Wh	at?
Alimony or Child Support \$			
How Many Will Occupy Premises: Adults	Childı	en	Pets
Make of Vehicle	_Year	_License Pl	ate #
Applicant will use Premises for Residential		Business	
If For Business, Specify Exact Type		**************************************	
IN CASE OF EMERGEN	ICY – NOTIFY:	(RELATI	VE)
Nearest Relative:	Dala	tionshin	
Address	Relationship		
Address	State	Zin	
City,	State	Z.p	
(Bank)	Checking	3	_Savings
Will you sign a rental agreement?	Do Vou l	Tave a Pet?	
What type:Will yo	u nut un a Pet D	enosit	
vviiat type:vviii yo	a pat up a ret z	срозіс	
Added information			
Do You Own Real Estate?	Where		
To verify the above statements are accurate and true requested information concerning me, hereby waive information. I hereby acknowledge the fact that Ga	ing all right of action	n for consequ	ences as a result of such
I/We hereby deposit \$ (same as rental a application is not accepted within Five (5) business Owner/Landlord accepts pets on certain premises a acceptance of this application, this deposit shall be and accepted I/We agree to execute a lease for _one of renting this property after three (3) days, I/We start three	banking days. I/W pet deposit of \$deposited in agent's year before poss	e also underst s Trust Accou	and that if the shall be paid. Upon nt. When so approved n. If/We should back out
If this application is not approved and accepted by applicant hereby waiving any claim for damages by may reject without reason for so doing.	the owner or agent reason of non-acco	, the deposit we eptance which	vill be refunded, the the owner or his agent
Applicant (s) and or Prospective Tenants understanded behalf of the owner or owners of the property.	nd that the Landlor	d/Agent curre	ently serves interest on
IT IS AGAINST THE LAW TO DISCRIMINATE OF RACE, RELIGION, NATIONAL ORIGIN, ACINCLUDE ADDITIONAL CLASSES WHICH AR HOUSING.	E, OR DISABILIT	Y. LOCAL (OR STATE LAWS MAY
Witness Signature	Applican	t Signature	
Accepted: Refused:			



This is a request for verification of employment history for the individual named below, who states that they are a present or former employee. Please take a moment to answer a few questions and return this form to the email, fax or address below.

Thank you for your cooperation with this matter!

Elen C. Penrose-Saathoff
Eileen C. Penrose-Saathoff

Property Manager Gateway Rentals

Fax: 402-463-8579 or email: eileen@ruhterauction.com

Phone: 402-463-4561

I HEREBY AUTHORIZE YOU TO RELEASE INFORMATION PECARDING MY EMPLOYMENT AT:

REGARDIN	NG MY EMPLOYMENT A	
${f v}$	ame and address of employer	
X	Signature	
Printed Name: Last	First	Middle Initial

VERIFICATION OF EMPLOYMENT

Employer Use Only

Start Date:	End Date	Gross Monthly Income \$
Position:	Is this person st	till employed by your organization? Yes/No
Do you anticipate this em company?Other Comments:		east one year of employment with your
Person providing informa	ition:	
Title:		Phone:

Office: 402.463.4561 • Fax: 402.463.8579 • E-mail: eileen@ruhterauction.com



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Thank you for your cooperation with this matter!

Eileen C. Penrose-Saathoff

Property Manager Gateway Rentals

Fax: 402-463-8579 or email: eileen@ruhterauction.com

Phone: 402-463-4561

VERIFICA	ATION OF RENTAL HISTO	ORY
I HEREBY AUTHORIZE Y	OU TO RELEASE INFORMATION TENANCY AT :	N REGARDING MY
	Address	
X	Date	
	Signature	
Printed Name:		

Landlord Use Only

Move in Date:Move Out DateMonthly Rent \$ Was rent paid on time? Yes/ NO If "NO" explain:		
How many late paym How well did Tenant		Is the Rent currently up to date? Yes/No
Tenant? Yes/No W	ity Deposit? Yes/No ere there any violation is tenant again? Yes/N	as of the lease agreement? Yes/ No
Person providing info	rmation:	
Title:		Phone:

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