

GRAND VALLEY PROPERTIES
RENTAL APPLICATION & INFORMATION RELEASE FORM

Return by Fax: (970) 434-9344 or Mail: 566 S. Asbury Ct., Grand Junction, CO 81504

PROPERTY ADDRESS OF RESIDENCE YOU ARE APPLYING TO RENT: _____

NUMBER OF BEDROOMS: _____ RENT PER MONTH: _____ SECURITY DEPOSIT _____

1st APPLICANT'S NAME _____

MAIDEN NAME _____ SOCIAL SECURITY # _____

BIRTHDAY _____ DRIVERS LIC. # _____ STATE _____

2nd APPLICANT'S NAME _____

MAIDEN NAME _____ SOCIAL SECURITY # _____

BIRTHDAY _____ DRIVERS LIC. # _____ STATE _____

PRESENT RESIDENCE INFORMATION

PRESENT ADDRESS _____ CITY _____

STATE _____ ZIP CODE _____ PHONE # (____) _____ IS THIS YOUR TELEPHONE?: ___ Yes ___ No

IF NOT, WHOSE TELEPHONE IS IT? _____

HOW LONG AT THIS ADDRESS _____ LANDLORD'S NAME _____

LANDLORD'S ADDRESS _____

PHONE # (____) _____ WHAT MONTH & YEAR DID YOU MOVE IN? _____

WHAT NAME IS USED BY GAS & ELECTRIC CO. FOR BILLING? _____

WHAT NAME IS USED BY THE PHONE COMPANY FOR BILLING? _____

WHY ARE YOU MOVING? _____ HOW MUCH IS YOUR CURRENT RENT? \$ _____

IF AT CURRENT RESIDENCE FOR LESS THAN ONE YEAR, PLEASE LIST ADDITIONAL PREVIOUS ADDRESS _____ CITY _____ STATE _____

LANDLORD'S NAME _____ PHONE # (____) _____

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NAMES OF PEOPLE WHO WILL BE LIVING AT THIS ADDRESS

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

NAME _____ RELATIONSHIP _____

EMPLOYMENT REFERENCES:

1st APPLICANT'S EMPLOYER _____

EMPLOYER'S ADDRESS _____ PHONE # (____) _____

SUPERVISOR'S NAME _____ DEPT _____ PHONE # (____) _____

LENGTH OF TIME EMPLOYED _____ YEARS _____ MONTHS POSITION _____

MONTHLY INCOME \$ _____ ANY ADDITIONAL INCOME \$ _____

2nd APPLICANT'S EMPLOYER _____

EMPLOYER'S ADDRESS _____ PHONE # (____) _____

SUPERVISOR'S NAME _____ DEPT _____ PHONE # (____) _____

LENGTH OF TIME EMPLOYED _____ YEARS _____ MONTHS POSITION _____

MONTHLY INCOME \$ _____ ANY ADDITIONAL INCOME \$ _____

PERSONAL REFERENCES (NOT RELATED)

NAME _____ ADDRESS _____ PHONE (____) _____

NAME _____ ADDRESS _____ PHONE (____) _____

NAME _____ ADDRESS _____ PHONE (____) _____

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IN CASE OF EMERGENCY CONTACT:

NAME _____ PHONE (____) _____

ADDRESS _____ RELATIONSHIP _____

NAME _____ PHONE (____) _____

ADDRESS _____ RELATIONSHIP _____

VEHICLES OWNED:

AUTO LIC.PLATE # _____ STATE _____ MAKE _____ YEAR _____

AUTO LIC.PLATE # _____ STATE _____ MAKE _____ YEAR _____

AUTO LIC.PLATE # _____ STATE _____ MAKE _____ YEAR _____

HAVE YOU EVER BEEN CONVICTED OF A [] FELONY, [] MISDEMEANOR? _____

If yes explain: _____

HAVE YOU EVER GONE THROUGH BANKRUPTCY, BEEN EVICTED, HAD ANY JUDGEMENTS, CREDITORS OR OTHER

LEGAL PROCEEDING AGAINST YOU? _____

If yes,
explain: _____

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I/we hereby authorize Todd or Bronwyn Beckstead and/or any Credit Information Services to obtain information concerning my past credit, and/or tenant-landlord history now or anytime in the future. I hereby authorize any of the following sources, including but not limited to landlords, public or privately owned utilities, current or past creditors, governmental housing agencies, and/or other credit reporting agencies to release any information to Todd or Bronwyn Beckstead, or any Credit Information Service concerning my/our past credit and/or tenant-landlord history. I hereby release any of the above sources, their officers, agents, or employees from any liability for damages of whatsoever kind or nature whether caused by negligence or otherwise which may at any time result to me/us by reason of compliance with the above mentioned inquiry which may include the answering of specific questions and the giving of any information concerning my/our past records.

I HAVE READ THE ABOVE AND I AM IN COMPLETE AGREEMENT WITH IT.

APPLICANT 1 SIGNATURE

DATE

APPLICANT 2 SIGNATURE

DATE