

Alpine Homes, LLC

P. O. Box 365

Star, ID 83669

ph: 208-713-3753

fax: 208-965-8299

RENTAL APPLICATION FOR:

PROPERTY LOCATION _____

DATE AVAIL _____ MONTHLY RENT \$ _____ DEPOSIT \$ _____

PETS no / yes w/limits: _____ UTILITIES PD BY RENTER _____

W/D HOOKUPS yes / no RANGE yes / no DISHWASHER yes / no REFRIGERATOR yes / no

APPLICANT A: FIRST NAME _____ M.I. _____ LAST NAME _____

PHONE NUMBER _____ DATE OF BIRTH _____ SOC. SEC. # _____

PRESENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

PRESENT OWNER _____ PRESENT OWNER'S PHONE # _____

PRESENT OWNER'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

RENT AMOUNT \$ _____ LIVED THERE FROM ____ / ____ / ____ TO ____ / ____ / ____ REASON FOR LEAVING _____

PREVIOUS ADDRESS _____ CITY _____ STATE _____ ZIP _____

PREVIOUS OWNER _____ PREVIOUS OWNER'S PHONE # _____

PREVIOUS OWNER'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

RENT AMOUNT \$ _____ LIVED THERE FROM ____ / ____ / ____ TO ____ / ____ / ____ REASON FOR LEAVING _____

PRESENT EMPLOYER _____ ADDRESS _____

POSITION _____ SUPERVISOR _____ PHONE # _____

PRESENT MONTHLY INCOME (NET) \$ _____ LENGTH EMPLOYED _____ FULL TIME () PART TIME ()

IF LESS THAN 5 YEARS WITH CURRENT EMPLOYER, PLEASE PROVIDE THE FOLLOWING:

PREVIOUS EMPLOYER _____ CITY _____ PHONE # _____

POSITION _____ SUPERVISOR _____ MONTHLY INCOME \$ _____

REASON FOR LEAVING _____ LENGTH EMPLOYED _____ FULL TIME () PART TIME ()

APPLICANT B: FIRST NAME _____ M.I. _____ LAST NAME _____

PHONE NUMBER _____ DATE OF BIRTH _____ SOC. SEC. # _____

PRESENT ADDRESS _____ CITY _____ STATE _____ ZIP _____

PRESENT OWNER _____ PRESENT OWNER'S PHONE # _____

PRESENT OWNER'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

RENT AMOUNT \$ _____ LIVED THERE FROM ____ / ____ / ____ TO ____ / ____ / ____ REASON FOR LEAVING _____

PREVIOUS ADDRESS _____ CITY _____ STATE _____ ZIP _____

PREVIOUS OWNER _____ PREVIOUS OWNER'S PHONE # _____

PREVIOUS OWNER'S ADDRESS _____ CITY _____ STATE _____ ZIP _____

RENT AMOUNT \$ _____ LIVED THERE FROM ____ / ____ / ____ TO ____ / ____ / ____ REASON FOR LEAVING _____

PRESENT EMPLOYER _____ ADDRESS _____

POSITION _____ SUPERVISOR _____ PHONE # _____

PRESENT MONTHLY INCOME (NET) \$ _____ LENGTH EMPLOYED _____ FULL TIME () PART TIME ()

IF LESS THAN 5 YEARS WITH CURRENT EMPLOYER, PLEASE PROVIDE THE FOLLOWING:

PREVIOUS EMPLOYER _____ CITY _____ PHONE # _____

POSITION _____ SUPERVISOR _____ MONTHLY INCOME \$ _____

REASON FOR LEAVING _____ LENGTH EMPLOYED _____ FULL TIME () PART TIME ()

Pets Y / N How Many _____ What Kind _____ Children Y / N How Many _____ Ages _____

OUTSTANDING DEBTS LISTED FOR APPLICANT A & B

	TYPE	LENDER	MONTHLY PAYMENT	BALANCE
VEHICLE 1				
VEHICLE 2				
OTHER				

CREDIT CARDS: _____

Name on Card _____ Type _____ Payment _____ Balance _____

Name on Card _____ Type _____ Payment _____ Balance _____

BANKS: _____

Bank Name _____ Name on Acct _____ Branch _____

Bank Name _____ Name on Acct _____ Branch _____

PERSONAL REFERENCES: _____

Name _____ Relationship _____ Phone # _____

Name _____ Relationship _____ Phone # _____

EMERGENCY CONTACT: LIST A FRIEND OR RELATIVE NOT LIVING WITH YOU _____

Name _____ Relationship _____ Phone # _____

Address _____ City _____ State _____ Zip _____

VEHICLES AND/OR RVs TO BE PARKED ON PREMISES: _____

1) _____ License # _____ Make _____ Model _____

2) _____ License # _____ Make _____ Model _____

3) _____ License # _____ Make _____ Model _____

Has any applicant ever been convicted of a felony? _____ **Explain** _____

I hereby deposit with Agent/Owner the sum of \$ _____ as () partial () full security deposit on the above named premises pending execution of a rental agreement. I understand that this deposit **will not** be refunded if this application is approved and I can not or will not fulfill the conditions of occupancy (meaning I decide not to rent this property). This deposit **will** be refunded if this application is not approved, provided all the above questions are answered correctly and truthfully.

I hereby grant permission to the Agent/Owner to verify the above information and/or to run a credit report and/or background check. I ALSO AGREE TO HAVE VERIFICATION OF ANY OR ALL OF THIS INFORMATION RELEASED TO ALPINE HOMES, LLC. I understand that this application does not constitute any oral or written agreement on the part of the Agent/Owner.

An application fee of \$15 per person must be paid before the application will be processed.

X _____
Applicant A _____ Date _____

X _____
Applicant B _____ Date _____

Email address _____

Email address _____

RETURN THIS APPLICATION TO: **Alpine Homes P O Box 365 Star, ID 83669**

Website: AlpineHomesID.com

Email: AlpineHomesLLC@gmail.com

Please Note: Faxed or Emailed Applications will not be accepted without prior arrangements with the manager. _____
Manager initials