## **BROWNSTONE REALTY RENTAL APPLICATION**

Date:	Address of property	Apt#					
Name:							
Present address:			State & Zip:				
Present phone:					_		
Present landlord:	Pho	How long:	R	ent paid:			
Previous address:			State & Zip:				
Previous landlord:	Pho	How long:	R	ent paid:			
Personal references (No	relatives) Must have 2:						
Name:	Address:		Phone:				
Name:	Address:		Phone:				
Present Employer:	Add	Address:			Phone:		
How long:	Position:	Position: Salary:		Supervisor:			
Previous Employer:	Add	ress:		Phone:			
How long:	Position:	Salary	<u>/:</u>	Supervisor:			
Automobile Make:	Year:	Color:	License P	late #:	State:		
Driver's License #:	State:	E-mail addres	SS				
Social Security #:							
ocial occario, "							
Date of Birth:		· 					
*Dloogo ya	the book of this applies	tion if you roomin	o additional and	as for inform	ntion		
	e the back of this applica	•	•				
SE	CURITY DEPOSIT IS RE	<u>FUNDABLE IF TH</u>	IS APPLICATIO	NIS REJECTI	<u>CD.</u>		
After approval of this applicat							
Rental Agreement within 7 d Applicant refuses to execute							
Landlord or its Agent as liq	uid damages, NO EXCEPT	IONS. Applicant ui	nderstands that the	rent is due on	the first (1st) day of each		
month. Applicant has read an	d understands all conditions	set forth above. This	s will certify that a	ll statements abo	ve are true.		
				Initia	ls		
SECURITY DEPOSIT A	ND 1 <sup>st</sup> _MONTHS RENT M	UST BE A MONE	Y ORDER MAD	E OUT TO THE	BUILDING		
		<u>,</u>		ەركىرى <u>ى كەنى بەرگىكى ك</u>			
Applicant Signature			Date				
					<del></del>		
<u>.Mo</u>	onthly Rental						
De	posit_Amount:	Appli	ication Fee:				



789 Sherman St., Suite 320, Denver, CO 80203 (303) 832-8155 - Fax (303) 830-7353 - Email = BRL@Rmi.net Visit Our Website Apartment Database: www.BrownstoneRealtyDenver.com



## **APPLICATION TO RENT**

☐ TENANT ☐ CO-TENANT ☐ GUARANTOR/CO-SIGNOR

Property Address_			City	State	Zip				
fortice is the same	Town 4.		ERSONAL INFORMA	ATION	¥				
First Name:									
Middle Name:			Dri	Driver's License: State:					
Last Name:			So	Social Security Number:					
AKA /Nickname:			Em	Email Address:					
	) Work:() Date of Birth: MM/DD/YYYY								
Cent troncing									
OTHER PROPOSE	D OCCUPANTS	(Including Minors) All	OCCUPANTS OVER 19	YEARS OF AGE MUST CON	IDI ETE A SEDAR	PATE APPLICATION			
	Aiddle Initial	Last Name	Relationship	Social Security N		Date of Birth			
			5			2			
limited to credit check	ks, unlawful d	letainer checks, telech	eck and agrees to fo	by authorize verification urnish additional credit re d for the administrative o	eferences upo	n request . Applicant			
Applicant Signature				Date	Time_				
We do business in ac	cordance wil any person be scriminated a	th the FEDERAL FAIR ecause of race, color, against may file a con	HOUSING LAW (Th	ne Fair Housing Amendn cap, familial status, or n discrimination by calling	nents Act of 3	1988). It is illegal to			

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