Raleigh Management Rental Application

Tel: (201) 490-7800 • Fax: (201) 488-8405

Last Name	**First Name**	**M.I.**	Co-Applicant Last Name	First Name	M.I.

Date of Birth	**Social Security Number**	**Home Telephone**	**Date of Birth**	**Social Security Number**	**Home Telephone**
/ /	- -	( ) -	/ /	- -	( ) -

Current Street Address	**City**	**State**	**Zip Code**	Co-Applicant Current Address (if different)	City	State	Zip Code
Previous Street Address	City	State	Zip Code	Co-Applicant Previous Address (if different)	City	State	Zip Code

Length of Residence at Current Address	Ever Filed for Eviction?	Own or Rent?	Length of Residence at Current Address	Ever Filed for Eviction?	Own or Rent?
___ months	☐ Yes ☐ No	☐ Own ☐ Rent	___ months	☐ Yes ☐ No	☐ Own ☐ Rent

Present Housing Information

Landlord or Agent Name	Landlord Telephone Number		Co-Applicant Landlord or Agent Name	Landlord Telephone Number	
	( ) -			( ) -	
Reason for Leaving	Length of Rental	Monthly Rent	Reason for Leaving	Length of Rental	Monthly Rent
	___ months			___ months	

Employment / Income Information

Present Employer Name	**Position**		Co-Applicant Employer Name	Position	
Supervisor Name	**Telephone Number**		Supervisor Name	Telephone Number	
	( ) -			( ) -	
Employer Address	City	State Zip Code	Employer Address	City	State Zip Code
Employed ☐ Check Here if Not Employed	**Salary / Wages**	*per* ☐ month ☐ year	Employed ☐ Check Here if Not Employed	Salary / Wages	*per* ☐ month ☐ year
From To			From To		
Other Income ☐ SSI ☐ Disability ☐ Retirement ☐ Other	Amount	*per* ☐ month ☐ year	Other Income ☐ SSI ☐ Disability ☐ Retirement ☐ Other	Amount	*per* ☐ month ☐ year

Banking Information

Bank Name	Telephone Number		Name	Telephone Number	
	( ) -			( ) -	
Account Number	Account Type ☐ Checking ☐ Savings	Ever Filed for Bankruptcy? ☐ Yes ☐ No	Account Number	Account Type ☐ Checking ☐ Savings	Ever Filed for Bankruptcy? ☐ Yes ☐ No

Emergency Contact Information

Name	Telephone Number		Name	Telephone Number	
	( ) -			( ) -	
Address	Relationship		Address	Relationship	

Other Information

Car Year / Make / Model	License Plate State / Number		Car Year / Make / Model	License Plate State / Number	
/ /			/ /		
Other Residents (Names / Ages)			Other Residents (Names / Ages)		
Have you ever been convicted of a crime? ☐ Yes ☐ No If "Yes", #: _____	If "Yes", Date of Most Recent Conviction?	Nature of Conviction	Have you ever been convicted of a crime? ☐ Yes ☐ No If "Yes", #: _____	If "Yes", Date of Most Recent Conviction?	Nature of Conviction

Applicant Signature(s)

By signing below, I/we authorize that the above information is correct and complete and authorize Landlord to obtain information it deems desirable in the processing of my application, including; credit reports, civil or criminal actions, rental history, employment/salary details, police and vehicle records, and any other relevant information. If I rent the unit, I understand the information on this form may be maintained in a tenant database for up to 5 (five) years after I vacate the premises. I also understand that the application fee is non-refundable, even if my application is rejected.

Applicant: ***X*** ***Date:*** ***Co-Applicant:*** ***X*** ***Date:***

Items in **BOLD** are **REQUIRED**

OFFICE USE ONLY		
NTN Access Number:	*Address/Unit Applied for:*	***Monthly Rent*** *Amount for unit applicant is applying for:* ***$***
Date Screened:	*Projected Move-In Date:*	*Apartment / Unit Type:*

Submit above information to NTN
Phone: (800) 422-8299 Fax: (888) 885-7528 Web: *www.ntnonline.com*