

Canal Place Management Company

6818 Shoaff Road
Fort Wayne, IN 46818
Phone/Fax 260-749-7170

RESIDENTIAL RENTAL APPLICATION
(Each adult must complete a separate application)

Please Print Clearly
Property/Unit: _____

1. Applicant Name _____ Phone _____

Present

Address: _____

How long have you lived there? _____ Social Security Number _____

2. Present Landlord _____ Phone _____

Landlord

Address: _____

Monthly Rent _____ Reason for
Leaving _____

3. Previous Landlord _____ Phone _____

Landlord

Address: _____

Monthly Rent _____ How long did you live there?

Reason for
Leaving _____

4. Full names of all individuals (and ages of all children) who will be occupying premises:

5. Pets

(specify) _____

6. Have you ever been evicted, sued for nonpayment of rent, or breached a lease (if so, explain)?

7. Present Employer _____ Phone _____

Employer

Address _____

Occupation: _____

Title: _____

Gross Monthly Salary _____ Length of
Employment _____

8. Previous Employer _____ Phone _____

Employer

Address _____

Occupation: _____

Title: _____

Gross Monthly Salary _____ Length of
Employment _____

9. Other Income, if any (specify)

10. Checking Account Bank Name _____

Address

Account Number _____ Approximate Balance

11. Savings Account Bank Name _____

Address

Account Number _____ Approximate Balance

12. Additional Account Bank Name _____

Address

Account Number _____ Approximate Balance

13. Credit Cards: (list individually)

Bank _____ Issuing

Account Number _____ Current Balance

Bank _____ Issuing

Account Number _____ Current Balance

Bank _____ Issuing

Account Number _____ Current Balance

Bank _____ Issuing

Account Number _____ Current Balance

Bank _____ Issuing

Account Number _____ Current Balance

Bank _____ Issuing

Account Number _____ Current Balance

14. Loans: (list individually)

Lender Name _____ Lender

Address: _____

Monthly Payments _____ Account

Balance _____

Lender Name _____ Lender

Address: _____

Monthly Payments _____ Account

Balance _____

15. Other Debts and Obligations (specify) _____

16. Personal Reference _____ Phone _____

Reference
Address: _____

17. Automobiles:

Your Driver License Number _____ Issuing State _____

(1) Make/Model _____ Year _____ Plate _____ State _____

(2) Make/Model _____ Year _____ Plate _____ State _____

18. In case of emergency notify _____
Relationship _____

Address: _____

Phone: _____

I certify that the above information is true and complete. I authorize the verification of this information by contacting any or all individuals and financial institutions listed above. I understand that this is not a lease or an offer to rent. No binding obligation of any kind exists between the owner and myself unless and until a lease is signed. This Application is subject to prior Applications. This Application shall remain the property of the owner.

Signature of Applicant _____ Date _____

NO PERSON SHALL BE DENIED THE RIGHT TO RENT OUR PROPERTY BECAUSE OF THEIR RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN OR ANCESTRY.