

RESIDENTIAL RENTAL APPLICATION

Landlord

Landlord Name: Buffalo Properties

Return application to:

Address: 2608 Hwy 30 E Kearney, NE 68847 (if after hours put in the drop box in the front)

Phone: (308) 224-3163

Rental Property Information

Rental Property Address:

Application to rent suite #

Anticipated Possession Date: _____, _____

The term of the tenancy will be One year lease.

The monthly rent will be \$

Initial Security Deposit: \$

Applicants' Personal Information

Applicant's Name: _____

Home Phone: (_____) _____ Alternative Phone: (_____) _____

Email Address (Optional): _____ Date of Birth: _____

Applicant's Social Security Number: _____

Second Applicant's Name: _____

Second Applicant's Date of Birth: _____ Phone: (_____) _____

Second Applicant's Social Security Number: _____

Third Applicant's Name: _____

Third Applicant's Date of Birth: _____ Phone: (_____) _____

Third Applicant's Social Security Number: _____

Name(s) of Dependent(s):

Date(s) of Birth:

Do you have a pet? Yes / No If more than one, how many? _____
Please describe type(s) of pet(s):

Residential History

Present Address: _____
City: _____ State: _____
ZIP Code: _____ How long at this address? _____
Landlord / Lessor: _____ Phone: (_____) _____
Email: _____
Ending Rent: \$ _____

Previous Address 1: _____
City: _____ State: _____
ZIP Code: _____ How long at this address? _____
Landlord / Lessor: _____ Phone: (_____) _____
Email: _____
Ending Rent: \$ _____

Details of Employment

Employer: _____
Position: _____ Date Hired: _____
Supervisor's Name: _____ Phone: (_____) _____
Salary: _____

(If employed less than one year with present employer, please provide previous employer.)

Employer: _____
Position: _____ Date Hired: _____
Supervisor's Name: _____ Phone: (_____) _____
Salary: _____

Other Sources of Income

Do you receive income from any of the following sources? Yes / No
Student Loans _____ Pension Benefits _____ Social Assistance _____ Other _____

Vehicle Information

Make / Model: _____ Year: _____
License Plate Number: _____ Driver's License Number: _____
Make / Model: _____ Year: _____
License Plate Number: _____ Driver's License Number: _____

Banking Information

Banking Institution: _____
Address: _____ Phone: (_____) _____

References

Name: _____ Phone: (_____) _____
Name: _____ Phone: (_____) _____

Emergency Contact

Name: _____
Relationship: _____ Phone: (_____) _____

Criminal & Credit Background Check Authorization

Is there anything negative that we may find in our criminal or credit background check that you want to comment on?

I declare that the information I have provided is accurate. I authorize the individual or organization to whom this application is submitted to: (a) contact my references and all other persons that I have named in this application; and (b) perform a credit and/or criminal check to assess my suitability as a tenant/lessee.

Applicant's Signature _____ Date _____