



# RENTAL APPLICATION

MONOPOLY I, LLC  
1505 S. Michigan Ave  
Suite 1A  
Joplin, MO 64804

Rental Unit Applying for \_\_\_\_\_ Date of Occupancy \_\_\_\_\_

Legal Name of Applicant \_\_\_\_\_ Date of Birth \_\_\_\_\_

Primary Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Social Security Number \_\_\_\_\_ Drivers License Number \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Length of Tenancy at Current Address \_\_\_\_\_ Current Lease Ending Date \_\_\_\_\_

Current Landlord's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Previous Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Previous Landlord's Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Current Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

Length of Employment \_\_\_\_\_ Gross Monthly Income \_\_\_\_\_

Past Employer (if less than 6 months) \_\_\_\_\_ Occupation \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

Length of Employment \_\_\_\_\_ Gross Monthly Income \_\_\_\_\_

Names and Ages of Persons Living in Apartment/House 1.) \_\_\_\_\_

2.) \_\_\_\_\_ 3.) \_\_\_\_\_

4.) \_\_\_\_\_ 5.) \_\_\_\_\_

### Name, Address, Phone Number, and Relationship of Personal References

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

### Credit Grantor, Address, and Phone Number

1.) \_\_\_\_\_

2.) \_\_\_\_\_

3.) \_\_\_\_\_

Have you ever filed for Bankruptcy? \_\_\_yes \_\_\_no If yes, when? \_\_\_\_\_

Have you ever been served with an eviction notice or been asked to vacate a property you were renting?

\_\_\_yes \_\_\_no Have you willfully or intentionally refused to pay rent when due? \_\_\_yes \_\_\_no

Have you ever been arrested and/or convicted of a crime? \_\_\_yes \_\_\_no If yes, please explain \_\_\_\_\_

Co-Signer Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Relationship to you \_\_\_\_\_ How Long at Address \_\_\_\_\_ Rent \_\_\_\_\_ Own \_\_\_\_\_

Social Security Number \_\_\_\_\_ Driver's License Number \_\_\_\_\_

Current Employer \_\_\_\_\_ Phone Number \_\_\_\_\_

Contact Person \_\_\_\_\_ Length of Employment \_\_\_\_\_

Vehicle Information

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Plate Number \_\_\_\_\_

Make \_\_\_\_\_ Model \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Plate Number \_\_\_\_\_

I/We, the undersigned, authorize MONOPOLY 1, LLC and their representatives, to investigate my/our credit qualifications and hereby release, in any manor, all of the information obtained by you. I/We further release all persons, agencies, or firms from any liabilities resulting from providing such information.

I/We declare under penalty that the information listed in this application is true and correct. I understand this application is subject for approval.

Applicant \_\_\_\_\_ Date \_\_\_\_\_

As Co-Signer I understand this application is a part of the lease and that my signature on this document binds me to all obligations on the lease executed between the applicant and Lessor.

Co-Signer \_\_\_\_\_ Date \_\_\_\_\_

FOR OFFICE USE ONLY-DO NOT WRITE BELOW

Application Verification	Person Contacted	Remarks
Present Landlord _____		
Previous Landlord _____		
Employment _____		
References _____		