**Client Evaluation Form**

**Application Fee: $35**

Date SSN DOB Driver’s Lic #

Name

Present Address

City State Zip

How Long at Present Address? Landlord Telephone

**Telephone Numbers:**

Home Work Best Time To Call

Cell Fax Pager

Employer/Name of Company

Position Start Date Annual Income

Spouse’s Name

Spouse’s SS# DOB

Spouse’s Employer Annual Income

Previous Address

City State Zip

How Long at Previous Address? Landlord Telephone

**Type of Home/ Features Desired:**

Single Family Townhouse Condo

Bedrooms Bathrooms Square Footage

Preferred Areas (List in order of your preference)

Date you’re able to move in How long have you been looking?

Number of Adults Number of Children Pets & Types

What is the maximum rent you could pay, while remaining in your comfort zone?

What is your present monthly rent?

What is the most option consideration you are prepared to pay?

**Financial Information:**

Do you have any credit problems? If so, explain:

Have you ever filed a petition for bankruptcy? If so, when?

Have you ever been evicted from a tenancy? If so, when?

Have you ever intentionally refused to pay rent when due? If so, when?

What is your present credit rating? Excellent Good Fair Poor Unsure

**Credit References Limit Balance**

**Monthly Obligations:**

Auto Payments Rent Utilities Telephone

Insurance CCs Child Support Alimony

Mortgages Loans Other

**Additional Notes:**

**I declare that the foregoing information is true and correct. I authorize its verification and the obtaining of consumer credit report.**

**All information contained in this document is strictly confidential, and is for the sole purpose of determining how our program would best be suited for your present financial needs and future goals.**

Signature of applicant Date

Signature of spouse Date