

Rental Application for Residency

Bay Breeze Apartment Homes

3125 Warm Springs Road Henderson, Nevada 89014 Office (702) 458-3354 Fax (702) 456-7116

*Each co-resident and occupant over 18 must submit a separate application.
Spouses may submit a joint application.*

Rent: \$ _____ Lease Term: _____ Unit: _____ M/I Date: _____

Applicant Information

First, Middle, Last	Social Security Number	Driver's License/ID # & State	Date of Birth
(Spouse) First, Middle, Last	Social Security Number	Driver's License/ID # & State	Date of Birth

Additional Occupants

All persons who are to occupy the unit should be listed here. Continue on a separate page if necessary.

Full Name: First, Middle, Last	Date of Birth	Relationship

Contact Information

	Home Number	Work Number	Cell or Other Number
Applicant			
Spouse			

Current Residency Information

Property Name	Street Address	City, State, Zip	Move-In Date	Rental Amount	Property Phone Number

Previous Residency Information

Property Name	Street Address	City, State, Zip	Move-In Date	Rental Amount	Property Phone Number

Employment History - Applicant

Company Name	Phone Number	Occupation	Hire Date	Gross Monthly Income

Employment History - Spouse

Company Name	Phone Number	Occupation	Hire Date	Gross Monthly Income

Additional Income

Additional income such as court ordered child support, alimony, rental income, or social security income need not be disclosed unless pertinent income qualifications. If pertinent, supportive documentation must be furnished.

Gross Monthly Amount	Source of Income



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Background Information

Have you, your spouse, and/or any occupant of this unit ever been: (Check Yes or No)	Yes	No
Convicted of a crime or felony? If yes, please explain below.		
Evicted for Non-Payment of Rent?		
Evicted for another reason? If yes, please explain below.		
Do you owe any apartment community money?		

Vehicle Information

Make	Model	Color	Year	License Plate No.	State

Emergency Information

Name of Contact	Street Address	City, State, Zip	Phone Number	Relationship

In case of emergency, whereupon you are unavailable due to disappearance, injury, or death, do the above-named person(s) have your permission to enter your apartment and/or remove any or all of your belongings? (Circle Yes or No)

Yes	No
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Application Agreement

I/We understand that I acquire no rights to any apartment until I sign this agreement and submit the **HOLDING FEE of \$_____** and **NON-REFUNDABLE APPLICATION FEE of \$_____**. Upon approval of tenancy and the signing of an apartment rental agreement, this fee will be credited towards my move-in costs. In consideration for Bay Breeze's holding said apartment at 3125 W. Warm Springs Road in Henderson, Nevada, I hereby waive all rights to the return of said holding fee and the said fee shall be retained as liquidated damages in the event I do not choose to enter into the agreement applied herein. In the event application for tenancy is denied, the holding fee shall be returned to the applicant(s) within thirty (30) days.

Pursuant to State & Federal Fair Credit Reporting Acts, this is to inform you and that you have authorized Bay Breeze to obtain a consumer report, and or any other information deemed necessary for the purpose of evaluating my application. I understand that such information may include, but is not limited to, credit history, civil and criminal information, records of arrest, rental history, employment and vehicle records. I hereby expressly release Bay Breeze and any procurer or furnisher or information, from any liability in the use, procurement, or furnishing of such information and understand that my application information may be provided to various local, state, and/or federal agencies.

Upon written request, you are entitled to a complete and accurate disclosure of the investigation's nature and scope as well as a written summary of your rights and remedies under the Fair Credit Reporting Act. Inquiries should be directed to First Advantage Safe Rent, 7300 Westmore Road, Rockville, Maryland 20850 and Bay Breeze Apartments.

I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We authorize First Advantage Safe Rent and Bay Breeze to obtain all reports and information necessary to verify the information put forth in the above application. False, fraudulent, and/or missing information will be grounds for denial of tenancy or subsequent.

_____	_____	_____
Applicant's Signature	Date	
_____	_____	_____
Spouse's Signature	Date	
_____	_____	_____
Owner's Representative Signature	Title	Date

