

FPI RENTAL APPLICATION - TAX CREDIT

A separate application is required from each occupant 18 years of age or older.

APPLICANT INFORMATION						
LAST NAME	FIRST NAME	M.I.	Marital Status	D.L. #	SSN	DATE OF BIRTH
OTHER RESIDENTS						
LAST NAME	FIRST NAME	M.I.	RELATIONSHIP	SSN	DATE OF BIRTH	
LAST NAME	FIRST NAME	M.I.	RELATIONSHIP	SSN	DATE OF BIRTH	
LAST NAME	FIRST NAME	M.I.	RELATIONSHIP	SSN	DATE OF BIRTH	
RESIDENCE HISTORY - PLEASE PROVIDE ALL RESIDENCE HISTORY FOR PAST 2 YEARS						
CURRENT ADDRESS	ADDRESS, CITY, STATE, ZIP					PHONE
	MOVE-IN DATE	MOVE-OUT DATE	MONTHLY PAYMENT		OWN/RENT/LEASE	
	LANDLORD OR MORTGAGE CO.	ADDRESS, CITY, STATE, ZIP			PHONE	
	REASON FOR MOVING					
PREVIOUS ADDRESS	ADDRESS, CITY, STATE, ZIP					PHONE
	MOVE-IN DATE	MOVE-OUT DATE	MONTHLY PAYMENT		OWN/RENT/LEASE	
	LANDLORD OR MORTGAGE CO.	ADDRESS, CITY, STATE, ZIP			PHONE	
	REASON FOR MOVING					
WILL YOU HAVE PETS?	DESCRIBE PET	WILL YOU HAVE ANY LIQUID FURNITURE?		DESCRIBE FURNITURE		
EMPLOYMENT & INCOME INFORMATION						
CURRENT EMPLOYER	EMPLOYER NAME	ADDRESS, CITY, STATE, ZIP				PHONE
	SUPERVISOR NAME	START DATE	SALARY per Year, Month, Hour (circle one)		POSITION/OCCUPATION	
PREVIOUS EMPLOYER	EMPLOYER NAME	ADDRESS, CITY, STATE, ZIP				PHONE
	SUPERVISOR NAME	END DATE	SALARY per Year, Month, Hour (circle one)		POSITION/OCCUPATION	
(circle one)	ADDITIONAL INCOME (Alimony, Child Support or Other) PLEASE EXPLAIN:					
VEHICLES						
AUTO #1 - MAKE	MODEL	YEAR	COLOR	LICENSE	STATE	
AUTO #2 - MAKE	MODEL	YEAR	COLOR	LICENSE	STATE	
BANKING AND CREDIT REFERENCE						
CREDIT REFERENCE	ACCOUNT #	ADDRESS, CITY, STATE, ZIP			TELEPHONE NO.	
NAME OF BANK OR SAVINGS & LOAN (BRANCH)	CHECKING ACCOUNT #	ADDRESS, CITY, STATE, ZIP			TELEPHONE NO.	
	SAVINGS ACCOUNT #					
HAVE YOU EVER FILED FOR BANKRUPTCY?	WHEN?	HAVE YOU EVER BEEN EVICTED OR ASKED TO MOVE?		DESCRIBE		

EMERGENCY CONTACT			
NAME OF NEAREST RELATIVE/CONTACT	RELATIONSHIP	ADDRESS, CITY, STATE, ZIP	PHONE
NAME OF NEAREST RELATIVE/CONTACT	RELATIONSHIP	ADDRESS, CITY, STATE, ZIP	PHONE
PERSONAL REFERENCE			
NAME OF PERSONAL REFERENCE	LENGTH OF ACQUAINTANCE	ADDRESS, CITY, STATE, ZIP	PHONE
NAME OF PERSONAL REFERENCE	LENGTH OF ACQUAINTANCE	ADDRESS, CITY, STATE, ZIP	PHONE

APPLICATION PROCESSING FEE \$30.00

In compliance with the FAIR CREDIT REPORTING ACT, this is to inform you that a credit investigation involving the statements made on this application for tenancy of this apartment community is being initiated. I further authorize FPI Management, Inc. to obtain credit reports, character reports and rental history as needed to verify all information put forth in this application. Management reserves the right to terminate at its election if any person knowingly or willingly makes fraudulent statements on this application. It is illegal and against our policy to discriminate against any person because of race, religion, color, sex, national origin or disability.

<p>I understand that I acquire no rights in an apartment until a fully executed rental agreement has been completed and all monies due have been paid. I certify that to the best of my knowledge, all statements are true and complete.</p>	
<p>_____</p> <p><i>(Signed/Applicant)</i></p>	<p>_____</p> <p><i>Date</i></p>