

RENTAL APPLICATION

The following sections must be completed by the Applicant. Please note that, except for married couples, each occupant who is 18 years of age or older is required to complete a separate application to rent.

Shall the Applicant have any question regarding the rental unit, please contact Josh Hunt at:

Email Address: info@912groupprentals.com

Phone: 785-550-4851

The Applicant is a: *(check one)*

☐ Tenant

☐ Tenant with co-tenant(s)

☐ Guarantor/co-signer - If you do not have previous rental history, you must have a co-signer. Co-signer credit information must be submitted below on page 6.

PREMISES INFORMATION

Application to rent property at the following address:

912 Tennessee St., Lawrence, KS 66044

Type of Property: House

Date of Availability: 8/1/2025

Proposed Move-In Date:

Type of Lease Term: Year-to-Year

Monthly Rent Payment: \$2,800.00

Initial Security Deposit: \$2,800

APPLICANT'S INFORMATION

Please attach a copy of your Driver's License, State ID, Military ID, or Passport.

FULL NAME APPLICANT:

Date of Birth: _____(Optional)

Social Security Number: _____(Optional)

Driver's license number or any valid ID: _____State: _____

Expires: _____

Email Address: _____

Home Phone: (_____) _____Alternative Phone: (_____) _____

OTHER OCCUPANTS' INFORMATION

Name: _____

Relation to Applicant: _____Date of Birth: _____(Optional)

Name: _____

Relation to Applicant: _____Date of Birth: _____(Optional)

Name: _____

Relation to Applicant: _____Date of Birth: _____(Optional)

Name: _____

Relation to Applicant: _____Date of Birth: _____(Optional)

EMERGENCY CONTACT

Emergency contact #1: _____

Relationship: _____

Address: _____

Phone: _____

Email Address: _____

Emergency contact #2: _____

Relationship: _____

Address: _____

Phone: _____

Email Address: _____

ADDITIONAL INFORMATION

PETS

Pets are **not** allowed in the rental property.

WATERBEDS

The Landlord prohibits the use of waterbeds on the rental unit.

SMOKING AND VAPING

The Landlord does not allow smoking or vaping in the rental unit.

YARD WORK/SNOW REMOVAL

The owners of the property are responsible for mowing and lawncare.
The Tenant will be responsible for snow removal.

RENTER'S INSURANCE

The Tenant is required to obtain Renter's Insurance upon leasing this Property.

Initial Acknowledgement of Additional Information: _____

PARKING

The rental unit includes 3 parking space(s) on the premises with the following description:

Parking behind house

Does the Applicant own a vehicle? Yes () No ()

Does the Applicant own more than one vehicle? Yes () No ()

Vehicle 1: *(if applicable)*

Make: _____ Model: _____ Year: _____

License no.: _____ State: _____ Expires: _____

Vehicle 2: *(if applicable)*

Make: _____ Model: _____ Year: _____

License no.: _____ State: _____ Expires: _____

Vehicle 3: *(if applicable)*

Make: _____ Model: _____ Year: _____

License no.: _____ State: _____ Expires: _____

RESIDENCE HISTORY

Current Residence

Current Address: _____

City/State/Zip: _____

From: _____ to _____

Name of Landlord/Manager: _____

Landlord/Manager's Phone: _____

Landlord/Manager's E-mail: _____

Reason(s) for leaving this address:

Previous Residence *(if applicable)*

Previous Address: _____

City/State/Zip: _____

From: _____ to _____

Name of Landlord/Manager: _____

Landlord/Manager's Phone: _____

Landlord/Manager's E-mail: _____

Reason(s) for leaving this address:

Has the Applicant ever been evicted from a rental property
before?

Yes () No ()

Has the Applicant missed two or more consecutive rental
payments in the past year?

Yes () No ()

Has the Applicant ever refused to pay rent when due?

Yes () No ()

If the Applicant has answered YES to any of the above questions, please state when and why:

EMPLOYMENT DETAILS

Current Employment

Current Employer: _____

Current Employer Address: _____

Employment Status: () Full-Time () Part-time () Student () Unemployed () Retired

From: _____ to _____

Supervisor: _____

Supervisor's Phone: _____

Supervisor's Email Address: _____

Employment Gross Income: \$ _____ per _____

Other income information:

Previous Employment *(if applicable)*

Previous Employer: _____

Previous Employer's Address: _____

From: _____ to _____

Supervisor: _____

Supervisor's Phone: _____

Supervisor's Email Address: _____

Employment Gross Income: \$ _____ per _____

Other income information:

PROOF OF INCOME

The Landlord requires proof of income from the Applicant in order to process this rental application. Please attach a letter from an employer certifying your income or any other document which can serve as proof of your real income, such as bank statements or true copies of your IRS tax returns from the previous year.

CREDIT INFORMATION AND BACKGROUND CHECK AUTHORIZATION

Has the Applicant filed for bankruptcy within the last seven (7) years? Yes () No ()

Does the Applicant consent to a credit check? Yes () No ()

Name of creditor:	Account number:	Monthly payment:	Balance due:
Name of Bank/Branch:	Account number:	Balance:	Balance due:

Does the Applicant wish to comment on anything that we may find out through our credit check and which could adversely affect his or her application?

CRIMINAL BACKGROUND CHECK AUTHORIZATION

Does the Applicant wish to comment on anything that we may find out through our **criminal** background check and which could adversely affect their application?

Has the Applicant ever been convicted of or pleaded no contest to
a felony? Yes () No ()

Does the Applicant consent to a criminal background check? Yes () No ()

CONSENT & ACKNOWLEDGEMENT

By signing this Residential Rental Application, the Applicant accepts and agrees to the following:

- (i) This is only an application to rent and does not guarantee that the Applicant will be selected as a tenant of the premises.
- (ii) The Landlord or Manager or his/her authorized Agent could receive multiple rental applications for the premises and will only select the most qualified individual.
- (iii) Applicant represents the above information to be true and complete.

Applicant hereby authorizes the Landlord or Manager or his/her authorized Agent to do the following:

- (i) Verify all of the personal information provided above.
- (ii) Obtain a credit report, as well as other reports, on the Applicant.
- (iii) Applicant further authorizes the Landlord or Manager or his/her authorized Agent to disclose information to the owners or agents of the premises with whom the Applicant intends to have a rental relationship.

Does the Applicant wish to receive a copy of the reports that we may obtain?

Yes (☐) No (☐)

Notice of Non-Discrimination

The Landlord does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any approval/disapproval of this application.

Applicant's Name

Applicant's Signature

Date

Co-Applicant's Name

Co-Applicant's Signature

Date

Co-Applicant's Name

Co-Applicant's Signature

Date