

SHAW RENTALS

www.shaw-rentals.com

NAME: _____

DATE OF BIRTH: _____ PHONE: _____

EMAIL ADDRESS: _____

CURRENT ADDRESS: _____

LANDLORDS NAME: _____ PHONE _____

MOVE IN DATE _____ LEASE EXPIRATION _____

NUMBER OF LATE PAYMENTS _____ NUMBER OF NSF'S _____

ANY PROBLEMS OR DAMAGES _____

IS INDIANA YOUR LEGAL ADDRESS _____ IF NO, WHERE? _____

DORM _____

RA _____ PHONE _____

EMPLOYER _____ PHONE _____

HOW LONG EMPLOYED _____ MONTHLY INCOME _____

PERSONAL REFERENCE _____ PHONE _____

OTHER SOURCE OF INCOME _____

BANK (CHECKING) _____ CITY _____

EMERGENCY CONTACT _____ RELATIONSHIP _____

ADDRESS _____ PHONE _____

PERMANENT ADDRESS _____

CITY/STATE/ZIP _____

HOW DID YOU HEAR ABOUT US? _____

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE, MY SIGNATURE PROVIDES AUTHORIZATION FOR THE CONFIRMATION OF THE INFORMATION. I UNDERSTAND THAT ANY FALSE STATEMENTS CONTAINED HEREIN IMMEDIATELY RENDER THIS APPLICATION VOID OF CONSIDERATION. I UNDERSTAND THAT THIS APPLICATION DOES NOT CONSTITUTE ACCEPTANCE OR REJECTION BY SHAW RENTALS.

SIGNATURE OF APPLICANT

DATE