

RENTAL APPLICATION

Each Co-Resident Or Co-Signer Must Submit A Separate Application

Please Print Using Black or Blue Ink

Apartment Name Sonoma Village Apartments 1318 S Vineyard St., Mesa AZ		Agent's Name Norma A. Marin		Application Date	
Tele – 480 833-2959/1 800 354-0893 Fax – 480 833-1643 Leasing@sonomavillageapartments.com		Move In Date		Rental Amount	Deposit Amount
Applicant's Name (Last, First, Middle)		Birth Date (MM-DD-YY) - -		Driver's License # and State Issued	
Applicant's Name (Last, First, Middle)		Birth Date (MM-DD-YY) - -		Driver's License # and State Issued	
<input type="checkbox"/> Partial Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Widowed		Applicant's Social Security # - -	Spouse's Social Security # - -	<u>Verified</u>	
Residence History					
Present Address		Apt #	City	State	Zip
Home Phone () -		<input type="checkbox"/> Own <input type="checkbox"/> Rent	Rent Amount	Move In Date	Move Out Date
Present Landlord / Mortgage Company / Apartment Community		Phone # (Including Area Code) () -			
Previous Address		Apt #	City	State	Zip
Previous Landlord / Mortgage Company / Apartment Community		Phone # (Including Area Code) () -			
Employment History					
Present Employer		Phone () -		Supervisor	
Address (Include City, St, Zip)		Position	Monthly Income	Hire Date	End Date
Previous Employer		Phone () -		Supervisor	
Address (Include City, St, Zip)		Position	Monthly Income	Hire Date	End Date
Spouse's Present Employer		Phone () -		Supervisor	
Address (Include City, St, Zip)		Position	Monthly Income	Hire Date	End Date
Spouse's Previous Employer		Phone () -		Supervisor	
Address (Include City, St, Zip)		Position	Monthly Income	Hire Date	End Date
Additional Income				<u>Verified</u>	
Additional income such as child support, alimony, or separate maintenance need not be disclosed unless such additional income is to be included for qualification hereunder. Amt of \$ _____ per _____				Source _____	
Credit and Loan References					
Auto #1		License #		State	
Financed Through		Account #		Monthly Payment	
Other Loans					
Financed Through		Account #		Monthly Payment	
<input type="checkbox"/> American Express <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard		Exp Date	Account #	<u>Verified</u>	
Bank References					
Name of Bank or Savings & Loan		Address (Include City, St, Zip)		Phone () -	

