

JOHN HADERLEIN & SON, INC.
3049 N. ASHLAND AVE.
CHICAGO, IL 60657
773-525-4666

REAL ESTATE MANAGEMENT
haderleinrental@yahoo.com

APARTMENT RENTAL APPLICATION

BUILDING ADDRESS: _____ **UNIT #** _____
MONTHLY RENT: \$ _____ **SECURITY DEPOSIT /MOVE-IN FEE: \$** _____
HEATING DISCLOSURE: \$ _____ **ANNUAL \$** _____ **MONTHLY** _____
APPLICATION FEE REQUIRED \$ 30.00 PER PERSON

APPLICANT NAME (first, middle, last) _____
CURRENT ADDRESS _____ **CITY** _____ **STATE** _____ **ZIP** _____
CELL PHONE _____ **WORK PHONE** _____
EMAIL ADDRESS _____
SOCIAL SECURITY NO. _____ **DATE OF BIRTH** _____
DRIVER LICENSE NO. _____ **STATE** _____

CURRENT LANDLORD _____ **PHONE NO.** _____
REASON FOR MOVING _____
PREVIOUS ADDRESSES FOR THE LAST 4 YEARS _____

CURRENT EMPLOYER _____ **EMPLOYED SINCE** _____
JOB TITLE _____
WORK ADDRESS _____ **CITY** _____ **STATE** _____
ANNUAL SALARY \$ _____ **OTHER INCOME \$** _____
SUPERVISOR'S NAME _____ **PHONE NO.** _____

NAMES OF OTHER ADULTS OCCUPYING THE UNIT _____

LIST OF MINOR CHILDREN AND AGES THAT WILL BE LIVING WITH YOU _____

LIST AUTOMOBILES (make, model, and year)

LIST PETS _____
PETS ARE NOT ALLOWED WITHOUT PRIOR APPROVAL – A DEPOSIT MAY BE REQUIRED

AUTHORIZATION: Applicant authorizes Landlord and Landlord's Representative to obtain a copy of Applicant's credit report, criminal background check, verify rental, employment, eviction or other information related to this Application with persons knowledgeable of such information and release this Application and any information contained herein in furtherance of these purposes. Applicant represents that the statements in this Application are true and complete. Applicant understands that submitting this Application does not guarantee acceptance and that providing false or inaccurate information is grounds for rejection.
This application is subject to the review and approval of the building owner.

APPLICANT SIGNATURE _____ **DATE** _____