

# RENTAL APPLICATION



NAME \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ STATE \_\_\_\_\_

CURRENT LANDLORD \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOW LONG HAVE YOU LIVED HERE? \_\_\_\_\_ MONTHLY RENT \$ \_\_\_\_\_

WHEN DOES YOUR LEASE EXPIRE? \_\_\_\_\_ HAVE YOU GIVEN NOTICE? \_\_\_\_\_

FORMER LANDLORD \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOW LONG DID YOU LIVE HERE? \_\_\_\_\_ MONTHLY RENT \$ \_\_\_\_\_

REASON FOR LEAVING?  
\_\_\_\_\_

IF THE TOTAL LENGTH OF THE PREVIOUS TWO TENANCIES IS LESS THAN TWO YEARS, LIST  
ADDITIONAL ADDRESSES WITH ZIP CODE:  
\_\_\_\_\_

ARE YOU A STUDENT? \_\_\_\_\_ AND/OR EMPLOYER \_\_\_\_\_

EMERGENCY CONTACT (BLOOD RELATIVE) \_\_\_\_\_

PHONE & ADDRESS \_\_\_\_\_

PROPERTY APPLYING FOR: \_\_\_\_\_ BEDROOMS: \_\_\_\_\_

NAMES OF CO-TENANTS (IF APPLICABLE, THEY WILL NEED TO SUBMIT SEPARATE APPLICATION)  
\_\_\_\_\_

VEHICLE MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ PLATE # \_\_\_\_\_

SMOKING AND PETS ARE PROHIBITED ON ALL RUSTON SPACES PROPERTIES

PLEASE EMAIL APPLICATIONS TO [ceira@cdiruston.com](mailto:ceira@cdiruston.com)