
Chamberlain Holdings, LLC

2977 Hwy K #228, O'Fallon MO 63368 | Office: (314) 260-6300 | Fax: (314) 677-3361

RENTAL APPLICATION

Address you are applying for: _____

Date of desired occupancy: _____

How much of a down payment can you raise? _____

What monthly payment are you trying to work within for your house payment? _____

APPLICANT #1

Name: _____

E-Mail: _____

Primary Phone: _____ Work Phone: _____

Social Security Number: _____ Driver's License # / State: _____

Birth Date: _____ Criminal Record (Yes / No / Minor): _____

Employer: _____ Position: _____ How Long? _____

Address _____ Phone: _____

Total Gross Monthly Income: \$ _____

Extra Sources of Income: _____ Amount: _____

Extra Sources of Income: _____ Amount: _____

APPLICANT #2

Name: _____

E-Mail: _____

Primary Phone: _____ Work Phone: _____

Social Security Number: _____ Driver's License # / State: _____

Birth Date: _____ Criminal Record (Yes / No / Minor): _____

Employer: _____ Position: _____ How Long? _____

Address _____ Phone: _____

Total Gross Monthly Income: \$ _____

Extra Sources of Income: _____ Amount: _____

Extra Sources of Income: _____ Amount: _____

OTHER PEOPLE TO BE LIVING IN THE HOME

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Name: _____ Relationship: _____ SSN#: _____ Birth: _____

Pets / What Kind / How Many: _____

RESIDENCE HISTORY

Present Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ If renting, Apartment name: _____

Monthly Payment: \$ _____

Landlord Name _____ Phone: _____

Previous Address: _____

City: _____ State: _____ Zip: _____

How Long? _____ If renting, Apartment name: _____

Monthly Payment: \$ _____

Landlord Name _____ Phone: _____

CHARACTER REFERENCE

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

I declare that the application is complete, true and correct and I herewith give my permission for anyone contacted to release the credit or personal information of the undersigned applicant to Management or their authorized agents, at any time, for the purposes of entering into and continuing to offer or collect on any agreement and/or credit extended. I further authorize Management or their Authorized Agents to verify the application information including but not limited to obtaining criminal records, contacting creditors, present or former landlords, employers and personal references, whether listed or not, at the time of the application and at any time in the future, with regard to any agreement entered into with Management. Any false information will constitute grounds for rejection of this application, or Management may at any time immediately terminate any agreement entered into in reliance upon misinformation given on the application.

Applicant #1

Date

Applicant #2

Date