

# DESERT WIDE PROPERTIES APPLICATION FOR RESIDENCY



3330 N DOBSON RD  
CHANDLER AZ 85224  
[FAX 480-730-8966](tel:480-730-8966)



RENTAL ADDRESS APPLYING FOR:	
MOVE IN DATE:	<b>MOVE INS ARE DONE MONDAY - FRIDAY AT OFFICE 8:30AM TO 4PM</b>

**APPLICANT:**

LAST NAME:	FIRST NAME:	MIDDLE INITIAL:
SSN:	D.O.B.:	DL#:
		STATE:

**RESIDENT HISTORY:**

CURRENT ADDRESS:	CITY:	STATE:	ZIP:
CURRENT PHONE:	LANDLORD/PROPERTY MGMT CO:	PHONE:	
RENT AMOUNT:	RESIDENCY DATES:		
REASON FOR LEAVING:			

PREVIOUS ADDRESS:	CITY:	STATE:	ZIP:
LANDLORD/PROPERTY MANAGEMENT CO:		PHONE:	
RENT AMOUNT:	RESIDENCY DATES:		
REASON FOR LEAVING:			

PREVIOUS ADDRESS:	CITY:	STATE:	ZIP:
LANDLORD/PROPERTY MANAGEMENT CO:		PHONE:	
RENT AMOUNT:	RESIDENCY DATES:		
REASON FOR LEAVING:			

**EMPLOYMENT HISTORY:**

CURRENT EMPLOYER:	EMPLOYER PHONE:	SUPERVISOR:
ADDRESS:	CITY:	STATE: ZIP:
POSITION/TITLE:	MONTHLY GROSS:	EMPLOYMENT DATES:

PREVIOUS EMPLOYER:	EMPLOYER PHONE:	SUPERVISOR:
ADDRESS:	CITY:	STATE: ZIP:

POSITION/TITLE:	MONTHLY GROSS:	EMPLOYMENT DATES:
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**CO-APPLICANT:**

LAST NAME:		FIRST NAME:	MIDDLE INITIAL:
SSN:	D.O.B.:	DL#:	STATE:

**RESIDENT HISTORY:**

CURRENT ADDRESS:		CITY:	STATE:	ZIP:
CURRENT PHONE:		LANDLORD/PROPERTY MGMT CO:	PHONE:	
RENT AMOUNT:	RESIDENCY DATES:			
REASON FOR LEAVING:				

PREVIOUS ADDRESS:		CITY:	STATE:	ZIP:
LANDLORD/PROPERTY MANAGEMENT CO:			PHONE:	
RENT AMOUNT:	RESIDENCY DATES:			
REASON FOR LEAVING:				

PREVIOUS ADDRESS:		CITY:	STATE:	ZIP:
LANDLORD/PROPERTY MANAGEMENT CO:			PHONE:	
RENT AMOUNT:	RESIDENCY DATES:			
REASON FOR LEAVING:				

**EMPLOYMENT HISTORY:**

CURRENT EMPLOYER:		EMPLOYER PHONE:	SUPERVISOR:	
ADDRESS:		CITY:	STATE:	ZIP:
POSITION/TITLE:	MONTHLY GROSS:	EMPLOYMENT DATES:		

PREVIOUS EMPLOYER:		EMPLOYER PHONE:	SUPERVISOR:	
ADDRESS:		CITY:	STATE:	ZIP:
POSITION/TITLE:	MONTHLY GROSS:	EMPLOYMENT DATES:		

**LIST THE PERSONS THAT WILL BE OCCUPYING THE PROPERTY:**

NAME	RELATIONSHIP	D.O.B.

**RENTAL QUESTIONNAIRE:**

HAVE YOU OR THE CO-APPLICANT(S) BROKEN A RENTAL AGREEMENT?	<b>YES</b>	<b>NO</b>
HAVE YOU OR THE CO-APPLICANT(S) BEEN EVICTED?	<b>YES</b>	<b>NO</b>
HAVE YOU OR THE CO-APPLICANT(S) BEEN CHARGED OR A DRUG RELATED CRIME?	<b>YES</b>	<b>NO</b>
HAVE YOU OR THE CO-APPLICANT(S) BEEN CHARGED OF A FELONY?	<b>YES</b>	<b>NO</b>

WILL THERE BE ANY PETS AT THE PROPERTY?					<b>YES</b>	<b>NO</b>
TYPE	BREED	WEIGHT	COLOR	AGE	LICENSE #	SPAY/NEUT

**LIST THE VEHICLES THAT WILL BE PARKED AT THE PROPERTY:**

MAKE	MODEL	YEAR	COLOR	STATE	LICENSE #

**PERSONAL REFERENCES: (3 NAMES, ADDRESSES, PHONE NUMBERS REQUIRED)**

NAME	ADDRESS	RELATIONSHIP	PHONE #:

HOW DID YOU HEAR ABOUT US?

**PLEASE READ CAREFULLY:**

APPLICANT(S) REPRESENTS THAT ALL OF THE ABOVE STATEMENTS ARE TRUE AND COMPLETE, AND HEREBY AUTHORIZES VERIFICATION OF ABOVE INFORMATION, REFERENCES AND CREDIT REPORTS. APPLICANT ACKNOWLEDGES THAT FALSE INFORMATION CONTAINED HEREIN CONSTITUTES GROUNDS FOR REJECTION OF THIS APPLICATION IF DISCOVERED BEFORE MOVE IN. APPLICANT ACKNOWLEDGES THAT MANAGEMENT MAY NOT BE ABLE TO COMPLETE COMPREHENSIVE ACTION OF THIS AGREEMENT BEFORE MOVE IN. MANAGEMENT RESERVES THE RIGHT TO VERIFY APPLICATION INFORMATION AFTER MOVE-IN AND MAY CONVERT THE PROPOSED RENTAL AGREEMENT TO A MONTH TO MONTH TERM IF MISLEADING INFORMATION IS CONTAINED IN THIS APPLICATION. THIS APPLICATION IS PRELIMINARY ONLY DOES NOT OBLIGATE OWNER OR REPRESENTATIVE TO EXECUTE A LEASE OR DELIVER POSSESSION OF THE PROPOSED PREMISES.

APPLICANT'S SIGNATURE:	DATE:
CO-APPLICANT'S SIGNATURE:	DATE:
CO-APPLICANT'S SIGNATURE:	DATE:
CO-APPLICANT'S SIGNATURE:	DATE: