ASI RENTALS APPLICATION

1165 S. RIVERSIDE DR **IOWA CITY, IA 52246**

FAX: 319-351-4102 Website: www.asirentals.com Email: apartments@asirentals.com

PHONE: 319-621-6750

PLEASE PRINT

SSN Age Female / Male	Name		Home Phone #			Cell #		
Vehicle Make								
Present Address	Any pets? Y N Type_	Breed	Weigh	Age				
Present Landlord	Vehicle Make	Model _	Year	r	Plate #	Color		
Reasons for Leaving	Present Address				Hov	v Long		
Previous Address	Present Landlord		Landlord Pho	one		Rent/month		
Previous Address	Reasons for Leaving							
Income						v Long		
Reasons for Leaving	Applicant's Current Oc	cupation		Emplo	yer			
List Other Additional Sources of Income Bank Name Location Credit Card Company	Income	How Long	Supervis	or Name o	& Phone _			
Bank Name Location Credit Card Company	Reasons for Leaving							
Have you filed for bankruptcy? Y N Do you need special accommodations? Y N Parents / Relatives Phone # Address Emergency Contact Phone # Address Smoke? Y N	List Other Additional S	ources of Income						
Parents / Relatives Phone # Address	Bank Name	Location		Credit	Card Co	mpany		
Parents / Relatives Phone # Address Address	Have you filed for bank	ruptcy? Y	N					
Emergency Contact Phone # Address Address Smoke? Y N	Do you need special acc	ommodations? Y	N					
Emergency Contact Phone # Address Address Smoke? Y N								
Smoke? Y N Waterbed? Y N Are you a College Student? Y N School Major Graduation Date Have you ever been convicted? Y N If yes, explained Have you ever been convicted of a Felony? Y N If yes, explained Have you ever been convicted of an offense involving drugs and alcohol? Y N If yes, explained I declare that the statements above are true and correct. I authorize verification of my references and credits as they relate to my tenancy and to future rent collection and agree any falsehoods stated above are grounds for the Landlord to void my lease agreement which we may enter into. Print Name	Parents / Relatives		Phone #		Address _			
Are you a College Student? Y N School Major Graduation Date Have you ever been convicted? Y N If yes, explained Have you ever been convicted of a Felony? Y N If yes, explained Have you ever been convicted of an offense involving drugs and alcohol? Y N If yes, explained I declare that the statements above are true and correct. I authorize verification of my references and credits as they relate to my tenancy and to future rent collection and agree any falsehoods stated above are grounds for the Landlord to void my lease agreement which we may enter into. Print Name Signature Date	Emergency Contact		Phone #		Address _			
Have you ever been convicted? Y N If yes, explained	Smoke? Y N	Waterbed?	Y N					
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Print Name Signature Date	-				_			
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	Print Name		Signature			Date		
Office Use Only (Building Apt # Approved)								