

**THE OXFORD
TENANT SCREENING APPLICATION**

Any person residing in the Oxford property over the age of eighteen must be screened. All applicants and co-applicants must pay an application fee of \$35.00 and provide a copy of a valid government issued ID.

(INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED)

This rental application is requested to assist the landlord in connection with the lease of his/her property. The information requested below is necessary to complete rental, criminal, employment, and credit screenings on all parties desiring to live in a unit over the age of eighteen. Your cooperation is appreciated and this information will be kept in confidence and used only in relation to the lease agreement. Please complete the application in its entirety and note that failure to do so may delay the processing or cause the Association to reject your application. The application fee must be made **payable to The Oxford** and submitted in certified funds (i.e. cashier's check or money order). Homeowners may pay with a personal check.

ABSOLUTELY NO CASH WILL BE ACCEPTED!

Date Received: / /

Received By: _____

Payment Method: _____

Approved/ Denied

Date Notified: / /

Manager's Initials: _____

| |
|--|
| Date: _____ Applying for Unit #: _____ |
| Applicant's full name: _____ |
| Phone #: (____) ____-____ Home (____) ____-____ Work (____) ____-____ Cellular |
| Date of Birth _____ Social Security # _____ |
| Driver's License # _____ State _____ |
| Spouse/Co-Applicant: _____ |
| Phone #: (____) ____-____ Home (____) ____-____ Work (____) ____-____ Cellular |
| Date of Birth _____ Social Security # _____ |
| Driver's License # _____ State _____ |

Rental History

Present Address: _____
City/State/Zip: _____ Move-In: _____ Move-Out: _____
Present Landlord/Apt. Mgr.: _____ Phone #: (____) ____-____
Reason for vacating your present residence _____
Previous Address: _____
City/State/Zip: _____ Move-In: _____ Move-Out: _____
Previous Landlord/Apt. Mgr.: _____ Phone #: (____) ____-____
Previous Address: _____
City/State/Zip: _____ Move-In: _____ Move-Out: _____
Previous Landlord/Apt. Mgr.: _____ Phone #: (____) ____-____

Credit Reference (Active Accounts only)

Name of your Bank: _____ City: _____
Checking Account #: _____ Savings Account #: _____
Name of Creditor: _____ Account #: _____
Name of Creditor: _____ Account #: _____

Employment

Employment Status: Full-time Part-time Student Retired Not Employed
Current Employer: _____
Address: _____
City/State/Zip: _____ Start Date: _____
Position: _____ Salary: \$ _____ End Date: _____
Supervisor Name: _____ Phone #: (____) ____-____
If there are any other sources of income you would like us to consider, please list income, source and person (Banker, Employer, etc.) who we may contact for confirmation. You do NOT have to reveal alimony, child support or spouse's annual income unless you want us to consider it in this application.

Previous Employment

Previous Employer: _____
Address: _____
City/State/Zip: _____ Start Date: _____
Position: _____ Salary: \$ _____ End Date: _____
Supervisor Name: _____ Phone #: (____) _____ - _____

Co-Applicant's Employment

Note: An additional screening fee is required for co-applicants of \$27.02
Spouse/Co-applicants Employer: _____
Address: _____
City/State/Zip: _____ Start Date: _____
Position: _____ Salary: \$ _____ End Date: _____
Supervisor Name: _____ Phone #: (____) _____ - _____

Co-Applicant's Previous Employment

Previous Employer: _____
Address: _____
City/State/Zip: _____ Start Date: _____
Position: _____ Salary: \$ _____ End Date: _____
Supervisor Name: _____ Phone #: (____) _____ - _____

Occupant(s)

Name(s) of all persons to be occupying the leased premises:
Name: _____ Relationship: _____ Date of Birth: _____
Name: _____ Relationship: _____ Date of Birth: _____
Name: _____ Relationship: _____ Date of Birth: _____
Name: _____ Relationship: _____ Date of Birth: _____

Parking

List all vehicles to be parked on premises by applicant, spouse, or children.

Make/Model _____ Color _____ Year ____ Tag # _____ State _____

Make/Model _____ Color _____ Year ____ Tag # _____ State _____

Pets

Will you or the other occupants have a pet? Yes_____ No_____

Number of pets:_____ Type:_____ Weight:_____ Breed: _____

Criminal Background

Have you or the co-applicant ever been convicted of a crime? Yes _____ No _____

If yes, please list details _____

_____.

Evictions

Have you or any co-applicant ever been evicted? Yes_____ No_____

Have you or any co-applicant ever broken a lease contract? Yes____ No____

Do you have a waterbed? Yes_____ No_____

If yes, do you have waterbed insurance? Yes_____ No_____

(Insurance must be provided upon move-in).

Correct Information

False information provided above shall be grounds for **Randall Management's** rejection of this application, retention of the application fee(s), and deposit(s) if any, as liquidated damages for the expenses of processing this application, and termination of applicant's/tenant's right of occupancy. The undersigned represents that the above statements are true and complete and hereby authorizes verification of said information. **Signature below authorizes Randall Management to obtain and provide Landlord/Managing Agent rental history, employment verification, criminal background, and credit report.**

Signature of Applicant

Date: _____

Signature of Co-Applicant

Date: _____