

**MOKAS MANAGEMENT  
RENTAL APPLICATION**

Location 101 E. 14<sup>th</sup> Avenue Date \_\_\_\_\_  
Unit Type Studio Apt. # \_\_\_\_\_ Date Available \_\_\_\_\_  
Monthly Rent Amount \$ \_\_\_\_\_ Date Rent Begins \_\_\_\_\_  
Security Deposit \$ \_\_\_\_\_ Pet Deposit \$ 150.00/300.00

**TO BE COMPLETED BY APPLICANT**

Applicant's Name \_\_\_\_\_ Cell Phone # (\_\_\_\_) \_\_\_\_\_  
Birth date \_\_\_\_\_ SS# \_\_\_\_\_ E-Mail \_\_\_\_\_  
Present Street Address \_\_\_\_\_ How long \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Landlord Name \_\_\_\_\_ Landlord's Phone # \_\_\_\_\_  
Present Employer \_\_\_\_\_ Work Phone # \_\_\_\_\_  
Position \_\_\_\_\_ Supervisor's Name \_\_\_\_\_  
Present Monthly Income \$ \_\_\_\_\_ Length of Employment \_\_\_\_\_  
Driver's License # \_\_\_\_\_ State \_\_\_\_\_

**Personal Reference**

**Emergency Contact**

Name _____	Name _____
Relationship _____	Relationship _____
Phone # _____	Phone # _____

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

I authorize the Creditor and its Assignee to make whatever inquiries it deems necessary in connection with this rental application and in the course of review or collection of any credit extended in reliance on this application. I further authorize any person or Consumer Reporting Agency to complete and furnish to the Creditor and its Assignee any information that it may have or obtain in response to such inquiries, and agrees that such information, along with this application, shall remain the Creditor's and Assignee's property, whether or not credit is extended. All information stated in this application is declared to be a true representation of the facts and made for the purpose of obtaining the credited requested.