

## APARTMENT RENTAL APPLICATION

## ADDRESS FOR APPLICATION:

## **Return form to:**

Millennium Properties R/E 205 W. Wacker Dr., Suite 1750 Chicago, Illinois 60606

312.338.3000 main 312-604-8903 fax info@mpirealestate.com

This management office does not discriminate against any person based on race, color, religion, sexual orientation, origin, familial status or disability.

Applicant understands that the application fee is non-refundable. Applicant understands that the security deposit is only refundable if this application is rejected by management, or at the time of moveout if all of the terms and conditions of the Lease agreement are fulfilled.

Co-occupants of legal age must fill out a separate rental application.

I hereby consent to allow Millennium Properties R/E, Inc. and its employees to obtain a full background check – including, but not limited to, a credit history, criminal activity, leasing activity – for the purpose of determining whether or not to lease an apartment to me. I understand that should I lease an apartment, Millennium Properties R/E, Inc. shall have a continuing right to review my credit information, rental application payment history and occupancy history for account review purposes and for improving application methods.

application methods.			
signature of applicant			
date			
signature of property manager			
date			
I am submitting this application with a co-applicant. yes no			
Name			

APPLICATION FEE: \$50/person of legal age
All potential tenants of legal age must submit an individual application

<u>All</u> fields below must be completed for serious consideration Include any additional documents to support this application including 2 most recent payroll stubs

APPLICANT INFORMATION	ON (must fill out comp	letely)
Name	D.O.B.	
SSN	 DL#	
Phone	 Fmail	
Current Address	_	_
City, State Zip		Rent / Own
Do you have any pets?	yes no	
Are you a Section 8 recipient?	yes no	
EMPLOYMENT INFORMA	ATION	
Current Employer		
Position	Monthly Income	
Contact Person	Employer Phone	·
How Long with this Company?_		
Additional Income? (child support,	social security, etc.)	
Current Landlord Information Name	Lease Expiration _	
Phone	Monthly Rent	
How Long at this Address?		
Previous Landlord Informatio	n	
Name	Move-Out Date	
Phone	Monthly Rent	
How Long at this Address?		
ADDITIONAL OCCUPANT	TS OF THE APARTMEN	Т
Name	Relationship	D.O.B
Name	Relationship	D.O.B.
Name	Relationship	D.O.B.
EMEDOENOV AGNITAGE	-	
EMERGENCY CONTACTS		D
Name	Relationship	Phone
Name	Relationship	Phone