

River City Rentals of Kansas, LLC

A separate application form is REQUIRED for each Adult (18 or Older)
who will live in the residence.

PERSONAL

Name:		Today's Date
Primary Phone #:		SS#:
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced		Birth date:
Email Address:		
Driver's License #:		Driver's License State:

ADDRESSES

Present Address:		Dates Occupied:
City:	State:	Zip:
How long at this address?	Rent Amount (per month):	
Landlord Name:	Landlord Phone Number:	
Is present rent up to date?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you given notice?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been asked to leave?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Reason for moving:		

If at above address less than two years, please list previous address.

Previous Address:		Dates Occupied:
City:	State:	Zip:
How long at this address?	Rent Amount (per month):	
Landlord Name:	Landlord Phone Number:	

OCCUPANTS

Number to Occupy:	Adults:	Children:
Name:	DOB:	Relationship:
Name:	DOB:	Relationship:
Name:	DOB:	Relationship:
Name:	DOB:	Relationship:
Pets?	If so, Please Describe:	

VEHICLES

Number of Vehicles:
Make/Model/License Number:

EMPLOYMENT (Applicant)

Current Employer:		Employment Start Date:
		Employment End Date:
Employer Street Address:		
City:	State:	Zip:
Supervisor Name:	Supervisor Phone Number:	
Your Job Title:	Hours/week worked:	
Monthly Gross Income:	Other Income:	

If at above job less than two years, please list previous employment.

Previous Employer:		Employment Start Date:
		Employment End Date:
Employer Street Address:		
City:	State:	Zip:
Supervisor Name:	Supervisor Phone Number:	
Your Job Title:	Hours/week worked:	
Monthly Gross Income:		

REFERENCES/EMERGENCY CONTACT over 18 who will not be living with you.

Reference Name:		Relation:	
Street Address:	City:	State:	Zip:
Phone Number:		Years Known:	
Reference Name:		Relation:	
Street Address:	City:	State:	Zip:
Phone Number:		Years Known:	

OTHER EXPENSES / MONETARY OBLIGATIONS

Please list All of your financial obligations (If more creditors use additional sheet of paper)

Name of Creditor	Address	Phone #	Mo Payment Amount

ADDITIONAL QUESTIONS (Questions pertain to ALL applicants listed on this application.)

Have you ever been sued for non-payment of bills, rent or property damage? If Yes, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed bankruptcy? If Yes, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever broken a lease or moved out before the end of a lease? If Yes, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been sued for eviction or asked to leave? If Yes, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been guilty of a felony? If Yes, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is the total move-in amount available now (rent and deposit)? If No, explain:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Which Apartment are you applying for?	

Please provide copies of last 2 pay stubs (or proof of income) and drivers license with application.

_____ (name) authorizes the RCR to contact past and present landlords, employers, creditors, credit bureau, neighbors and any other sources deemed necessary to investigate applicant. All the information is true, accurate and complete to the best of applicant's knowledge. Owner reserves the right to disqualify tenant if information is mis-represented.

Signature:	Date:
Return Application to office: ***If office is not open, there is a RCR Drop Box near the back (South) entrance to the building where you can put the application***	River City Rentals (RCR) 100 Highland (corner of Highland and Main St) Lansing, KS 66043 913-727-3804
Apply online via our secure website:	www.rcrentals.com
Mail Application to:	River City Rentals P.O. Box 303 Lansing, KS 66043

