

Sun Chase Apartments Homes

3200 McLeod Dr. Las Vegas, NV 89121 (702) 369-1112 Fax (702) 369-6296

Applicant:	Birth Date:	Social Security#	DL#
Other Occupants:	Other Occupants:	Telephone number:	
1	3	Do you have Renters Insurance Yes or No	
2	4		

Residence History

Current Residence:	How Long:	Rent/Own	Phone #	Payment\$
Landlord Address & Phone#				

Previous Residence History

Previous Address: (if less than 12 Months)	How Long:	Phone#	Payment\$
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Employment History

Applicant's Employment:	Supervisor:	Phone#	How Long:	Monthly Gross \$	Tips Yes/No \$
Job title:					
Previous Employment: (if less than 12 Months)	Supervisor:	Phone#	How Long:	Monthly Gross \$	Tips Yes/No \$
Job title:					

Emergency contact info

Your e-mail:	Family e-mail:
Family or relative address:	Phone:

Have you ever been Evicted for Non-Payment of rent Yes___No___
 Have you been convicted of a Felony Yes___No___

I understand I acquire no rights in an apartment until I sign this agreement and submit a holding fee in the amount of \$ 200.00 which is refundable for only 24 hours from the date below if I choose not to rent the apartment. Upon approval of tenancy and the signing of an apartment rental agreement this fee will be credited to the deposit or rent. I hereby waive All rights to the return of the holding fee and said fee shall be retained as liquidated damages in the event I do not choose to enter into the Agreement applied for herein. In the event said application for tenancy is not accepted, holding fee Shall be returned to applicant. I/We certify to the best of my/our knowledge that all statements are true and complete.

Signed/Tenant

Date

Signed/ Management

Equal Housing Opportunity