



LOTUS
Real Estate
ADVISORS



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PROPOSED RENTAL APPLICATION

HOME IS NON- SMOKING

Move-in date: _____, 20__ Lease term: _____ Deposit \$ _____ Rent \$ _____
Proposed address: _____ Pet rent \$ __30__ Pet Fee \$ __150__

PLEASE PRINT FULL LEGAL NAMES of all proposed occupants:

Applicant: _____ SSN: _____ Date of birth: _____

Driver's license _____ State Issued: _____

Current Address: _____

Home/Cell phone: _____ Email: _____

Own or Rent? _____ Monthly rent/pymt. _____ From: _____ To: _____

Landlord's name: _____ Phone # _____

Co-Applicant: _____ SSN: _____ Date of birth: _____

Driver's license _____ State Issued: _____

Current Address: _____

Home/Cell phone: _____ Email: _____

Own or Rent? _____ Monthly rent/pymt. _____ From: _____ To: _____

Landlord's name: _____ Phone #: _____

Names of children and/or other occupants: _____

Do you have any pets: _____ How many: _____ Type: _____ Sex: _____

Name(s) _____ Color/Markings? _____ Weight of pet(s): _____ & _____ lbs.

CURRENT EMPLOYER:

OTHER/ CO- APPLICANT EMPLOYER:

Company Name

Company Name

Address

Address

(_____) _____
Phone No. Supervisor/Personnel Dept.

(_____) _____
Phone No. Supervisor/Personnel Dept

Employment Dates:
From ____/____/____ To ____/____/____

Employment Dates:
From ____/____/____ To ____/____/____

Position & Title: _____

Position & Title: _____

Full time or Part time? _____

Full time or Part time? _____

Gross monthly income: \$ _____

Gross monthly income: \$ _____

Have you ever been: (1) evicted? _____ (2) declared bankruptcy? _____ (3) been foreclosed on? _____
 Automobile: Year: _____ Make: _____ Model: _____ License plate #: _____ Color: _____
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ALL HOMES ARE NON-SMOKING- NO SMOKING INSIDE HOME

List ALL monthly payments (cars, leases, credit cards, credit unions, bankruptcy payments, child support, alimony, etc.)
 \$ _____ for _____, \$ _____ for _____, \$ _____ for _____, \$ _____ for _____

PERSONAL REFERENCES (Parents, relatives, friends, work or business associates, others, etc.). This section must be completed.

1) _____ (_____) _____ (_____) _____
 Name Relationship Home Phone Work Phone

Address City State Zip

2) _____ (_____) _____ (_____) _____
 Name Relationship Home Phone Work Phone

Address City State Zip

3) _____ (_____) _____ (_____) _____
 Name Relationship Home Phone Work Phone

Address City State Zip

BANKING REFERENCES:

Checking account at _____ Savings account at _____
 _____ (_____) _____ _____ (_____) _____
 Address of branch Phone Address of branch Phone

IN CASE OF EMERGENCY CONTACT:

_____ Relationship: _____
 Cell/home (_____) _____ Work (_____) _____ Email: _____

The undersigned represents the above statements are true and complete, authorizing Owner/Management to verify all information using any form of credit and/or background check and speaking with employers & references. I understand this application does not constitute any oral or written commitment on the part of Owner/Management.

Applicant further understands that Owner/Manager is a licensed real estate broker in the State of Ohio.

 Applicant Signature Date Co-applicant Signature Date

LOTUS ADVISORS Internal Processing (please do not write below this line)

\$ 40 Application Fee in form of _____ received by _____ .

Receipt # _____ Background check date _____
 Notes: