



Property Management & Rental Office  
 200 East Summit Street • P. O. Box 1073 • Kent, OH 44240  
 Phone: 330-677-4722 • Fax: 330-677-4730  
 www.jkohlre.com

## RENTAL APPLICATION

**Application Fee \$30.00 (non-refundable)**

*Neatly complete all information below. All applicants over the age of 18 must complete and sign their own application.*

Address of property you are interested in \_\_\_\_\_

Applicants full name \_\_\_\_\_ Social Security # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Drivers License # \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Current Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How long at this address \_\_\_\_\_ Reason for leaving \_\_\_\_\_

Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

E-mail Address \_\_\_\_\_

Automobile Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ State/License Plate # \_\_\_\_\_

Current Landlords Name \_\_\_\_\_ Landlords Phone # \_\_\_\_\_

Present Employer \_\_\_\_\_ Position \_\_\_\_\_ Monthly Income \_\_\_\_\_

Work Phone # \_\_\_\_\_ How long at present job \_\_\_\_\_ Other Income/source \_\_\_\_\_

Employers Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent's Name(s) \_\_\_\_\_ Phone # \_\_\_\_\_

Parent's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Names, relationship and age of all other persons who will be living with you must be listed \_\_\_\_\_

Have you ever broken a lease or been evicted from any type of housing?  Yes  No

If yes, please explain \_\_\_\_\_

I CERTIFY that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for tenant screening as may be necessary in arriving at a tenant decision, I understand that the landlord may terminate any rental agreement entered into for any misrepresentations made above.

Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>For Office Use Only</b>			
Property Shown _____	Apt. # _____	Owner _____	
Monthly Rent \$ _____ + _____			
Date Shown _____			
Shown By _____			
Application Fee (non-refundable) \$ _____	Received (date) _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check/MO# _____	
Security Deposit \$ _____	Received (date) _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check/MO# _____	
Rent starts (date) _____	Will occupy (date) _____		
Lease starts (date) _____	Lease terminates (date) _____		

**AUTHORIZATION TO CONDUCT  
BACKGROUND AND CREDIT CHECKS**

I hereby authorized and consent to Jack Kohl Realty LLC conducting an investigation of my personal credentials as permitted by law including, but not limited to, inquiries with present and former employers, educational institutions, police departments and credit agencies regarding my employment, educational, criminal and credit histories.

This authorization also shall serve as an authorization to my present or former employers, educational institutions, credit agencies and bureaus and police departments to release my records or information pertaining to me to Jack Kohl Realty LLC and to make disclosures to the greatest extent permitted by law to allow Jack Kohl Realty LLC to assess my suitability as a tenant.

I will not assert any claim, cause of action or demand against Jack Kohl Realty LLC, its employees, officers, directors or agents which may arise from Jack Kohl Realty LLC's investigation of my credentials or from any of the above-mentioned entities for providing the information requested.

A copy of this Authorization can be relied upon by those parties from whom information about me is requested.

\_\_\_\_\_  
Sign Name

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date