

# APARTMENT LEASE APPLICATION & CREDIT CHECK FORM

## LEASE INFORMATION (TO BE COMPLETED BY LEASING AGENT)

SPACE ADDRESS: \_\_\_\_\_ PROJECT: \_\_\_\_\_  
APPROX. SQ.FT.: \_\_\_\_\_ BUSINESS NAME: \_\_\_\_\_  
RENT:\$ \_\_\_\_\_ /MO.(%) \_\_\_\_\_ /NUMBER OF RESIDENTS : \_\_\_\_\_

## PERSONAL INFORMATION

NAME: \_\_\_\_\_ MARTIAL STATUS: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ SPOUSE: \_\_\_\_\_  
CITY/STATE/ZIP: \_\_\_\_\_ SPOUSE'S SSN#: \_\_\_\_\_  
HOME PHONE #: \_\_\_\_\_ BUS PHONE #: \_\_\_\_\_ SPOUSE'S BIRTHDATE: \_\_\_\_\_  
SSN #: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_ SPOUSE'S PHONE #: \_\_\_\_\_  
MOTHER'S NAME: \_\_\_\_\_ DEPENDENTS: \_\_\_\_\_

## EMPLOYMENT INFORMATION

CURRENT EMPLOYMENT: \_\_\_\_\_ PREVIOUS EMPLOYER: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
PHONE #: \_\_\_\_\_ PHONE #: \_\_\_\_\_  
EMPLOYED FROM: \_\_\_\_\_ TO \_\_\_\_\_ EMPLOYED FROM: \_\_\_\_\_ TO \_\_\_\_\_  
SALARY: \_\_\_\_\_ SALARY: \_\_\_\_\_

## SCHEDULE OF INCOME

ANNUAL AMOUNT RECEIVED FROM:	\$ _____
SALARIES, WAGES, & PROFESSIONAL PRACTICE	\$ _____
RENTAL INCOME	\$ _____
INVESTMENTS, STOCKS & BONDS, INSURANCE	\$ _____
OTHER INVESTMENTS	\$ _____
<b>TOTAL GROSS INCOME:</b>	<b>\$ _____</b>

## GENERAL INFORMATION

EVER TAKEN BANKRUPTCY ? \_\_\_\_ IF YES, EXPLAIN PER ATTACHED EXPLANATION FORM BELOW  
EVER BEEN EVICTED ? \_\_\_\_ IF YES PLEASE EXPLAIN PER ATTACHED EXPLANATION FORM BELOW  
EVER BEEN ASKED TO VACATE ? \_\_\_\_ IF YES PLEASE EXPLAIN PER ATTACHED EXPLANATION FORM BELOW  
EVER BREACHED A LEASE AGREEMENT ? \_\_\_\_ IF YES, EXPLAIN PER ATTACHED EXPLANATION FORM BELOW

<u>NAME</u>	<u>PHONE #</u>
BANK REFERENCE: _____	
CREDIT REFERENCE: _____	
BUSINESS REFERENCE: _____	
PREVIOUS LANDLORD: _____	
CERTIFIED PUBLIC ACCOUNT: _____	
FRIEND OR RELATIVE IN OKLAHOMA CITY: _____	

I HEREBY AFFIRM THAT THE INFORMATION AND REPRESENTATIONS MADE IN THIS STATEMENT ARE A TRUE AND ACCURATE ACCOUNT OF MY FINANCIAL CONDITION AS OF THIS DATE AND THAT SUCH INFORMATION AND REPRESENTATIONS ARE MATERIAL INDUCEMENTS FOR THE PROPOSED LEASE AS REFERENCED ABOVE. I UNDERSTAND THAT THE PROPOSED LESSOR IS RELYING ON THE STATEMENTS MADE HEREIN ENTERING INTO SUCH A LEASE WITH ME. I AUTHORIZE THE PERSONS LISTED IN THE REFERENCE SECTION ABOVE TO RELEASE ANY AND ALL INFORMATION IN THEIR POSSESSION RELATING TO MY FINANCES TO PROPOSED LESSOR OR THEIR AGENT. I AGREE THAT A PHOTOGRAPHIC COPY OF THE JUST-MENTIONED AUTHORIZATION SHALL BE AS VALID AS THE ORIGINAL.

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**SIGNED:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

TO PROCESS THIS APARTMENT APPLICATION PLEASE E-MAIL THIS APPLICATION TO [EMARTIN@MAILCCP.COM](mailto:EMARTIN@MAILCCP.COM) OR MAIL THIS APPLICATION TO CAMBRIDGE COMMERCIAL PROPERTIES, 1000 W WILSHIRE BLVD,# 337 ,OKALHOMA CITY OKLAHOMA 73116 . ATTENTION TO: TEN-PENN APARTMENTS

**EXPLANATION FORM**

EVER TAKEN BANKRUPTCY:

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EVER BEEN EVICTED:

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EVER BEEN ASKED TO VACATE:

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EVER BREACHED A LEASE AGREEMENT:

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\_\_\_\_\_  
Applicants Signature

\_\_\_\_\_  
Applicant Print full name

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**CREDIT CHECK**  
CREDIT REPORT AUTHORIZATION

PLEASE HAVE THIS INFORMATION CONCERNING YOUR APPLICANT INFORMATION FOR CREDIT CHECK COMPLETED BY FILLING OUT ALL INFORMATION REQUESTED BELOW. AFTER COMPLETING THE FORM. PLEASE SEND TO THE E-MAIL [emartin@mailccp.com](mailto:emartin@mailccp.com) Or mail to 1000 W. Wilshire Blvd, Suite 337, Oklahoma City, Oklahoma 73116. Please attach a copy of current driver's license with this application.

APPLICANT \_\_\_\_\_  
Last First Middle

SPOUSE (IF JOINT REPORT) \_\_\_\_\_  
First Middle

PRESENT ADDRESS \_\_\_\_\_  
Number Street Apt. #

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

FORMER ADDRESS \_\_\_\_\_  
Number Street Apt. #

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

APPLICANT SSN# \_\_\_\_\_ SPOUSE SSN# \_\_\_\_\_

CELL NUMBER: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

I AUTHORIZE \_\_\_\_\_ TO ORDER MY CREDIT REPORT FROM NATIONAL CREDIT CHECK FOR THE FOLLOWING PURPOSE:

( ) REAL ESTATE RENTAL ( ) REAL ESTATE PURCHASE

\_\_\_\_\_  
APPLICANT SIGNATURE DATE SPOUSE SIGNATURE DATE

REPORT TYPE: TRW  EQUIFAX  TRANSUNION  BUSINESS RPT

PLEASE E-MAIL CREDIT APPLICATION TO [EMARTIN@MAILCCP.COM](mailto:EMARTIN@MAILCCP.COM)  
If you have any questions, please contact the exclusive leasing company Cambridge Commercial Properties  
LEASING BROKER Ed Martin (405)-226-7984