

OCR Property Management

507 E. Jefferson St. Plymouth, IN 46563

•Office: (574) 936 – 7616 •Email: davegoebel@remax.net

APPLICATION FOR RENTAL:

(Each adult applicant is required to complete a form and provide photo ID)

\$40 Processing Fee Required.

Property Of Interest: _____

*Name (First, Middle, Last): _____

*Date of Birth: _____ *Social Security #: _____

*Phone Number: _____ *Work Phone #: _____

Passport #: _____ *Driver's License #: _____

*E-MAIL ADDRESS: _____

Student? If yes, Year in school _____

*Current Address: _____

*How long at current address?: _____ Mo. Rent: _____ *Is rent past due? N Y

Reason for moving?: _____

*Landlord Name: _____ Phone #: _____

*Previous Address and how long at each:

1) _____ Years _____ Mo. _____

2) _____ Years _____ Mo. _____

3) _____ Years _____ Mo. _____

*Current Employer: _____ Years _____ Mo. _____

*Contact Name: _____ Phone #: _____

*Past Employer: _____ Years _____ Mo. _____

*Past Employer: _____ Years _____ Mo. _____

*Net Mo. Income: _____ *Monthly Expenses (excl. rent): _____

*Additional Sources of Income?: _____

Bank Balances: _____ Savings: _____

*Have you ever been charged with a felony? Y N If yes, explain on back.

*Have you ever been charged with a misdemeanor? Y N If yes, explain on back.

*Have you ever filed bankruptcy? Y N If yes, explain on back.

*Have you ever been evicted from a property? Y N If yes, explain on back.

*Have you lost a property through foreclosure? Y N If yes, explain on back.

*Have you been sued? Y N If yes, explain on back.

*Do you have pets? Y N Type: _____ Qty: _____

Vehicle(s): Make/Model/Year: _____
License plate #(s): _____

How many people will reside in leased premises?: _____
Names: _____

*In case of an emergency, contact (not living with you):
Name: _____ Phone# _____

How did you hear about this property?: _____

Preferred Date of Move-In: _____ Preferred Lease Term: _____

Professional References:
Name/Address/Phone #: _____
Name/Address/Phone #: _____
Name/Address/Phone #: _____

By signing below, I declare the statements above true and correct. Lessor may terminate lease if statements are found to be false. I hereby authorize verification on any and all of the above information including credit history.

*Applicant Signature: _____ Date: _____

(*) Required information noted with an asterisk.

EMPLOYMENT VERIFICATION

THIS SECTION TO BE COMPLETED BY MANAGEMENT AND EXECUTED BY TENANT

TO: (Name & address of employer)

Date: _____

RE: _____
Applicant/Tenant Name

Social Security Number

Unit # (if assigned)

I hereby authorize release of my employment information.

Signature of Applicant/Tenant

Date

The individual named directly above is an applicant/tenant of a housing program that requires verification of income. The information provided will remain confidential to satisfaction of that stated purpose only. Your prompt response is crucial and greatly appreciated.

Fax (574) 367 - 2164

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Project Owner/Management Agent

Return Form To:

THIS SECTION TO BE COMPLETED BY EMPLOYER

Employee Name: _____ Job Title: _____

Presently Employed: Yes _____ Date First Employed _____ No _____ Last Day of Employment _____

Current Wages/Salary: \$ _____ (check one)

☐ hourly ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ yearly ☐ other _____

Average # of regular hours per week: _____ Year-to-date earnings: \$ _____ from: ____/____/____ through: ____/____/____

Overtime Rate: \$ _____ per hour

Average # of overtime hours per week: _____

Shift Differential Rate: \$ _____ per hour

Average # of shift differential hours per week: _____

Commissions, bonuses, tips, other: \$ _____ (check one)

☐ hourly ☐ weekly ☐ bi-weekly ☐ semi-monthly ☐ monthly ☐ yearly ☐ other _____

List any anticipated change in the employee's rate of pay within the next 12 months: _____; Effective date: _____

If the employee's work is seasonal or sporadic, please indicate the layoff period(s): _____

Additional remarks: _____

Employer's Signature

Employer's Printed Name

Date

Employer [Company] Name and Address

Phone #

Fax #

E-mail

NOTE: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.

Employment Verification (March 2009)