

# Casper Rental Central LLC

638 E. 2<sup>nd</sup> St. Casper, WY 82601 Phone: (307) 266-5317 Fax: (307) 234-7175

## TENANT APPLICATION

### A. Applying to rent:

\_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ APT./UNIT \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

### B. Applicant name:

\_\_\_\_\_ FIRST \_\_\_\_\_ M.I. \_\_\_\_\_ LAST \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_\_-\_\_\_\_-\_\_\_\_\_

Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Type:  Telephone(vioce, standard)  Fax  Cellular  
 Pager  Toll-free  Mobile/PCS  Non-geographic  Special services  Undefined  Pay phone

E-mail address: \_\_\_\_\_

Have you ever been convicted of, plead guilty or a no contest plea to any felony, misdemeanor, or any other offense?

Yes  No

Current residence: \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ APT./UNIT \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Current residence move-in date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current rent: \$\_\_\_\_.\_\_\_\_ per month

Current Landlord's name: \_\_\_\_\_ FIRST \_\_\_\_\_ LAST \_\_\_\_\_

Current Landlord's telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Reason for moving: \_\_\_\_\_

### C. Spouse's name:

\_\_\_\_\_ FIRST \_\_\_\_\_ M.I. \_\_\_\_\_ LAST \_\_\_\_\_

Spouse's date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Spouse's Social Security number: \_\_\_\_\_-\_\_\_\_-\_\_\_\_\_

Date of marriage: \_\_\_\_/\_\_\_\_/\_\_\_\_

Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_ Type:  Telephone(vioce, standard)  Fax  Cellular  
 Pager  Toll-free  Mobile/PCS  Non-geographic  Special services  Undefined  Pay phone

Have you ever been convicted of, plead guilty or a no contest plea to any felony, misdemeanor, or any other offense?

Yes  No

### Spouse's current residence information is same as above

Spouse's Current residence: \_\_\_\_\_ STREET ADDRESS \_\_\_\_\_ APT./UNIT \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

Current residence move-in date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Current rent: \$\_\_\_\_.\_\_\_\_ per month

Spouse's Landlord's name: \_\_\_\_\_ FIRST \_\_\_\_\_ LAST \_\_\_\_\_

Current Landlord's telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_

Reason for moving: \_\_\_\_\_

**D. Other residences within the past 3 years:**

**1. Residence:**

\_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **APT./UNIT** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Residence move-in date: \_\_\_/\_\_\_/\_\_\_ Rent: \$\_\_\_\_\_ . \_\_\_ per month

Landlord's name: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_

Landlord's telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Reason for moving: \_\_\_\_\_

**2. Residence:**

\_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **APT./UNIT** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Residence move-in date: \_\_\_/\_\_\_/\_\_\_ Rent: \$\_\_\_\_\_ . \_\_\_ per month

Landlord's name: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_

Landlord's telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Reason for moving: \_\_\_\_\_

**3. Residence:**

\_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **APT./UNIT** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Residence move-in date: \_\_\_/\_\_\_/\_\_\_ Rent: \$\_\_\_\_\_ . \_\_\_ per month

Landlord's name: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_

Landlord's telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Reason for moving: \_\_\_\_\_

**E. Current employer:**

Address: \_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Start date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_ Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Supervisor: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_ Applicant income: \$\_\_\_\_\_ . \_\_\_ per month

Prior employer (if less than 3 years): \_\_\_\_\_

Address: \_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Start date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_ Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Supervisor: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_ Applicant prior income: \$\_\_\_\_\_ . \_\_\_ per month

Spouse's current employer:

Address: \_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Start date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_ Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Supervisor: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_ Spouse's income: \$\_\_\_\_\_ . \_\_\_ per month

Spouse's prior employer (if less than 3 years):

Address: \_\_\_\_\_ **STREET ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP CODE** \_\_\_\_\_

Start date: \_\_\_/\_\_\_/\_\_\_ End date: \_\_\_/\_\_\_/\_\_\_ Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

Supervisor: \_\_\_\_\_ **FIRST** \_\_\_\_\_ **LAST** \_\_\_\_\_ Spouse's prior income: \$\_\_\_\_\_ . \_\_\_ per month

**F. Children:**

- 1. Name: \_\_\_\_\_ Age: \_\_\_\_\_ years old  
FIRST M.I. LAST
- 2. Name: \_\_\_\_\_ Age: \_\_\_\_\_ years old  
FIRST M.I. LAST
- 3. Name: \_\_\_\_\_ Age: \_\_\_\_\_ years old  
FIRST M.I. LAST

**G. Pets:**

- 1. Name: \_\_\_\_\_ Type: \_\_\_\_\_ Age: \_\_\_\_\_ years old
- 2. Name: \_\_\_\_\_ Type: \_\_\_\_\_ Age: \_\_\_\_\_ years old
- 3. Name: \_\_\_\_\_ Type: \_\_\_\_\_ Age: \_\_\_\_\_ years old

**H. Nearest relative name:**

\_\_\_\_\_ Age: \_\_\_\_\_ years old  
FIRST M.I. LAST

Nearest relative address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

Nearest relative telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

**I. Spouse's nearest relative name:**

\_\_\_\_\_ Age: \_\_\_\_\_ years old  
FIRST M.I. LAST

Spouse's nearest relative address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

Nearest relative telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

**J. Personal references who are not employers, relatives, landlords, co-signers, or co-applicants:**

- 1. Name: \_\_\_\_\_  
FIRST M.I. LAST

Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

- 2. Name: \_\_\_\_\_  
FIRST M.I. LAST

Address: \_\_\_\_\_  
STREET ADDRESS CITY STATE ZIP CODE

Telephone number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

**K. You are authorized to check my credit and employment history and to answer questions about your credit experience with me.**

I/WE UNDERSTAND THAT THIS APPLICATION FEE IS NON-REFUNDABLE.

I would like a copy of my credit report:  Yes  No

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**Signature of Applicant** **Date** **Signature of Spouse** **Date**

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## Rental History Verification Request Form

To: \_\_\_\_\_  
Prior Landlord Name

From: Casper Rental Central, LLC  
638 E. 2<sup>nd</sup> St.  
Casper, WY 82601

Re: \_\_\_\_\_  
Applicant Name

I, \_\_\_\_\_, hereby authorize the release of my rental history  
Applicant Name  
information to Casper Rental Central, LLC.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Please take note that the above applicant, \_\_\_\_\_, has applied to rent  
Applicant Name  
one of our rental units. We respectfully request that you assist us in qualifying said applicant by taking a moment to fill out the information listed below. Thank you in advance for a prompt response.

\_\_\_\_\_  
Landlord/Landlord Representative

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

# Casper Rental Central LLC

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## Employment Verification Request Form

To: \_\_\_\_\_  
Employer Name

From: Casper Rental Central, LLC  
638 E. 2<sup>nd</sup> St.  
Casper, WY 82601

Re: \_\_\_\_\_  
Applicant Name

I, \_\_\_\_\_, hereby authorize the release of my employment  
Applicant Name  
information to Casper Rental Central, LLC.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date

Please take note that the above applicant, \_\_\_\_\_, has applied to rent  
Applicant Name  
one of our rental units. We respectfully request that you assist us in qualifying said applicant by taking a moment to fill out the information listed below. Thank you in advance for a prompt response.

\_\_\_\_\_  
Landlord/Landlord Representative

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Date