



MANAGEMENT MASTERS INC.

3370 N. Hayden Rd. #123-307, Scottsdale, AZ 85251
(480) 990-1833 - FAX (480) 990-1041
www.MgmtMasters.com

I/we submit this application for this property, and for these terms. If approved, I/we will sign the lease on the agreed terms:

Property Wanted _____ Desired Lease From _____ To _____

Rent \$ _____ Pet Fee \$ _____ Earnest Money \$ _____ Security Deposit \$ _____

Each Applicant Must Fill Out Separate Form, Unless Married With Joint Credit

PLEASE COMPLETE THIS APPLICATION WITH ALL PERTINENT DETAILS

Applicant's Name _____ Phone No. _____ Birth Date _____

Social Security No. _____ Any Other Names _____ Marital Status: Married () Single () Divorced ()

Spouse's Name _____ Any Other Names _____ Birth Date _____ SS# _____

Driver's License Number: Applicant _____ State _____ Spouse _____ State _____

Names and Ages of Anyone Else Who Will Occupy the Premises and Relationship to Applicant _____

Most Recent Address _____ Apt. # _____ City _____ State _____ Zip _____

Dates: From _____ To _____ Reason for Moving _____ Rent \$ _____

Landlord's Name _____ Address _____ Phone _____

City _____ State _____ Zip _____ Name of Apts. _____

Previous Address _____ Apt. # _____ City _____ State _____ Zip _____

Dates: From _____ To _____ Reason for Moving _____ Rent \$ _____

Previous Landlord's Name _____ Address _____ Phone _____

City _____ State _____ Zip _____ Name of Apts. _____

Applicant's Employer _____ Name of Supervisor _____

Address _____ City _____ State _____ Zip _____

Phone _____ Position _____ Salary \$ _____ Per Hr () Wk () Mo () # of Hours per Week _____ Date Started _____

Previous Employment _____ Name of Supervisor _____

Address _____ City _____ State _____ Zip _____

Phone _____ Position _____ Salary \$ _____ Per Hr () Wk () Mo () # of Hours per Week _____ Dates From _____ To _____

Spouse's Employer _____ Name of Supervisor _____

Address _____ City _____ State _____ Zip _____

Phone _____ Position _____ Salary \$ _____ Per Hr () Wk () Mo () # of Hours. per Week _____ Date Started _____

Spouse's Previous Employment _____ Name of Supervisor _____

Address _____ City _____ State _____ Zip _____

Phone _____ Position _____ Salary \$ _____ Per Hr () Wk () Mo () # of Hours per Week _____ Dates From _____ To _____

Other Source of provable, steady income _____

1. Name of Bank _____ Address _____ City _____ State _____

Checking Account Number _____ Savings Account Number _____

2. Name of Bank _____ Address _____ City _____ State _____

Checking Account Number _____ Savings Account Number _____

CREDIT REFERENCES

- 1. _____ Account Number _____ Phone # _____
- 2. _____ Account Number _____ Phone # _____
- 3. _____ Account Number _____ Phone # _____

CHARACTER REFERENCES (Friends, not Relatives or Business Associates)

- 1. _____ Address _____ Phone # _____
- 2. _____ Address _____ Phone # _____
- 3. _____ Address _____ Phone # _____

Has applicant, spouse, or any other proposed resident ever been convicted of a crime? Placed on probation/parole? Is there currently a warrant for your/their arrest? Are you currently involved in any criminal activity? ___ Yes ___ No If yes, give full explanation and details below.

Have you ever filed for Bankruptcy? ___ Yes ___ No Has the bankruptcy been discharged? ___ Yes ___ No Discharge date _____
 Have you ever been evicted? ___ Yes ___ No If yes, was landlord paid for amounts due? ___ Yes ___ No
 Do any of the occupants smoke? ___ Yes ___ No If yes, please list names. _____

VEHICLES

- 1. Make _____ Model _____ Year _____ Color _____ License No. _____ State _____
- 2. Make _____ Model _____ Year _____ Color _____ License No. _____ State _____
- 3. Make _____ Model _____ Year _____ Color _____ License No. _____ State _____

PETS:

Type (dog,cat,etc)	Breed	Name	Age	Weight	Color	Spayed/Neutered

Emergency Contact (Nearest Relative): Name _____ Telephone _____ Relation _____
 Address _____ City _____ State _____ Zip _____

A NONREFUNDABLE PROCESSING CHARGE IS PAYABLE WITH THIS APPLICATION IN THE AMOUNT OF \$25.00 PER ADULT. THE APPLICANT UNDERSTANDS THAT THE PROCESSING CHARGE WILL NOT BE REFUNDED UNDER ANY CIRCUMSTANCES OR APPLIED TO ANY MONIES DUE LESSOR.

Earnest money is payable to Management Masters, Inc. and must be submitted with application. Earnest money will be returned if application is disapproved. Earnest money will be used towards movein money due at the lease signing, and it will be retained by the lessor as liquidated damages if applicant is approved, but does not complete the lease.

A photocopy of a driver’s license or other official form of ID must be submitted with application.

Applicant understands that the giving of false information or tendering of a Bad Check may, at Lessor’s option, breach and void any subsequent lease. Lessor’s failure to deliver possession of the premises at the time agreed upon shall not subject lessor to damages in any amount.

Applicant understands that this application becomes part of the Rental Agreement (Lease). Applicant expressly authorizes Lessor/Owner or Owner’s agent (including a collection agency) to obtain Resident’s consumer credit report, which Lessor/Owner or Owner’s agent may use if attempting to collect past due rent payments, late fees, or other charges from Resident, both during the term of the lease and thereafter.

Applicant understands that a free copy of the Arizona Landlord and Tenant Act may be obtained from the Secretary of State’s office.

RELEASE

I/We, _____, (print name) understand that this application is a part of my/our lease agreement. Also, that as a part of normal procedure for processing this application, an investigative consumer report may be obtained whereby information as to my/our character, income, credit, employment stability, general reputation, personal characteristics and mode of living shall be researched. I/We hereby authorize release of information to Management Masters, Inc.

DATE

APPLICANT’S SIGNATURE

Referred By: _____

APPLICANT’S SIGNATURE