

BRIARCLIFF ESTATES APARTMENT APPLICATION

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APPLICANT	CO-APPLICANT/SPOUSE
Full name:	Full name:
Social Security # _ _ - - _ - _ - _ -	Social Security # _ _ - - _ - _ - _ -
Phone: Age:	Phone: Age:
Current Address:	Current Address:
City, State Zip	City, State Zip
How long lived at address?	How long lived at address?
Amount of rent paying now?	Amount of rent paying now?
Landlord's name:	Landlord's name:
Landlord's phone #:	Landlords phone #:
Why are you moving?----- ----- ----- -----	Why are you moving?----- ----- ----- -----
EMPLOYMENT	EMPLOYMENT
EMPLOYER:	EMPLOYER:
Phone:	Phone:
Address:	Address:
City, State Zip	City, State Zip
How long worked? Position:	How long worked? Position:
Weekly Earnings:	Weekly Earnings:
Other income:	Other income:
VEHICLES	VEHICLES
YEAR: MAKE:	YEAR: MAKE:
MODEL: TAG:	MODEL: TAG:

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APPLICANT	CO-APPLICANT/SPOUSE
NEXT OF KIN	NEXT OF KIN
Name:	Name:
Relation:	Relation
Phone:	Phone:
Address:	Address:
City, State Zip	City, State Zip
DEPENDENTS	DEPENDENTS
Name Age Sex	Name Age Sex
1.	2.
3.	4.
CREDIT REFERENCES	CREDIT REFERENCES
Creditor AVG.BAL. MO.PMT.	Creditor AVG.BAL. MO.PMT.
1.	1.
2.	2.
3.	3.
Auto Loan Monthly Payment:	Auto Loan Monthly Payment:
Bank:	Bank:

Do you have any pets? _____ (Allowed only with management approval and extra deposit.)

Expected occupancy date? _____

Comments: _____

I understand that Briarcliff Estates requires a one (1) year lease with a security/cleaning deposit. A 30 day written notice is required when apartment is to be vacated. Failure to fulfil lease agreement and rules can result in eviction and loss of deposit.

Signature of Applicant Date

Signature of Applicant Date

Approved by: Briarcliff Representative _____ Date _____

Owners: Dennis & Suzie Houser 423-764-2169 Apartment #: _____ Lease Date: _____