Grand Management
PO Box 3310
Lawrence, KS 66046
785-865-2505
785-841-4918 (fax)
Office: 3406 Aldrich
loujwcinc@sunflower.com

MUST BE COMPLETED IN FULL IN ORDER TO PROCESS

A non-refundable $ 40 application fee is required before processing. Each co-applicant and person who will occupy the premises over the age of 18 must complete a separate application and pay the application fee.

RENTAL APPLICATION			
Street		Floor Plan	
When Needed		Rental Rate	
# of persons living in unit (names & ages)		Deposit Amount Pet Deposit (if applicable)	

PERSONAL INFORMATION

Full name:_____Phone: _____

E-Mail Address: _____

Date of Birth:_____Social Security Number:_____

Height: _____ Weight: _____ Hair Color: _____ Eye Color: _____ Gender: _____

Driver's license number and state or government photo ID card no.: _____

Are you a US Citizen or Permanent Resident Alien: _____ Yes _____ No If you have answered no please provide information adequate to verify that you are lawfully in the United States and that your right to be in the US does not expire during your proposed lease term.

Do you or any proposed occupant smoke? _____ Yes _____ No

Name of Co-applicant(s):_____

Number & Age of Dependents Currently Living with You:_____

Number of Pets_____ Type, breed, and size: _____

Vehicle Info – Year/Make/Model/Color_____

RESIDENTIAL INFORMATION

PRESENT ADDRESS:_____

Street address *Apt.#* *email address*

_____ ( )

City *State* *Zip Code* *Phone*

_____ ( )

Present Landlord or Manager / Apartment Name *Phone*

_____ $

Dates of Occupancy *Rent/mo.*

PREVIOUS ADDRESS: _____

Street address *Apt.#*

( )

City *State* *Zip Code* *Phone*

( )

Previous Landlord or Manager / Apartment Name *Phone*

$

Dates of Occupancy *Rent/mo.*

EMPLOYMENT INFORMATION

STATUS: Full-time_____ Part-time_____ Student_____ Unemployed_____ Retired_____

CURRENT EMPLOYMENT:

( )

Company Name/Employer *Phone* *Supervisor*

Street Address *City* *State* *Zip Code*

Position *Gross monthly salary* *Starting date*

PREVIOUS EMPLOYMENT:

( )

Company Name/Employer *Phone* *Supervisor*

Street Address *City* *State* *Zip Code*

Position *Gross monthly salary* *Dates of employment*

ADDITIONAL SOURCES OF INCOME

$ ( )

Source *Amount* *Contact Person* *Phone*

$ ( )

Source *Amount* *Contact Person* *Phone*

ADDITIONAL FINANCIAL INFORMATION

BANK INFORMATION:

Bank *City/State* *Phone* *Account Number*

( )

HAVE YOU EVER...

Filed for bankruptcy?	_____Yes	_____No
Been evicted or asked to move out?	_____Yes	_____No
Been sued for rent or property damage?	_____Yes	_____No
Moved out before the end of the lease?	_____Yes	_____No
Willfully or intentionally refused to pay rent?	_____Yes	_____No

Been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion? _____Yes _____No

Been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? _____Yes _____No

If you have answered yes to any of the above items, we may need additional facts before making a decision on your rental application.

COSIGNER INFORMATION

A cosigner is required if applicant is under 25 &/or a student, does not meet income requirements or resident history qualifications.
Please have cosigner complete a separate form.

EMERGENCY CONTACT PERSON OVER 18, WHO WILL NOT BE LIVING WITH YOU.

Name:_____Home Phone: _____ Work Phone: _____

Address:_____

Relationship:_____

ACKNOWLEDGEMENT & SIGNATURE

The above information, to the best of my knowledge, is true and correct. I hereby authorize you to conduct character and consumer investigations and consent to such investigations including personal interviews with my references and others. I also authorize and request every person, company, agency, employer, bank, and association having control of documents, records or other information pertaining to me, to furnish the same to you. I hereby release, discharge and exonerate the landlord and leasing agent, their officers, directors, employees, and agents, and any person so furnishing information, from any and all liability of every nature and kind arising out of the investigation or the furnishing or inspection of such documents, records, and other information. Application fee is NON-REFUNDABLE. Checks for application fees or security deposits that are returned for any reason will be assessed an additional $30.00 fee. I understand that it may be a crime to provide false or misleading information on a rental application. If it is found that I have provided any false or misleading information on this application, it is grounds for denial of my application as well as grounds for immediate termination of any lease agreement.

Signature_____Date:_____