Homestead Rental
2332 Sky-Vue Lane
Manhattan, KS 66502

APPLICATION FOR RENTAL FURNITURE

FULL NAME_____PHONE-Home_____
First Middle Last Work_____
Social Security #_____Driver's License #_____
Present Address Where Furniture will be Located: Date of Birth_____
Street_____Apt#_____City/State_____Zip_____
Previous Address(if less than 1 yr at Present Address)
Street_____Apt#_____City/State_____Zip_____

Landlord's Name:_____Phone#_____
Apartment Name:_____
Apartment Office Address_____

Employer_____How Long____YR____MO
Address_____M.O. Income_____
Supervisor's Name_____Phone#_____

Spouse Name(If Applicable)_____
SS #_____First Middle Last
Employer_____How Long____YR____MO
Address_____M.O. Income_____
Supervisor's Name_____Phone#_____

Military Information (If Applicable):
Military Unit#_____Unit Phone#_____
1st Sargent's Name_____Phone #_____
Military Rank_____will you be deployed in the next 3 months_____ETS Date_____

Name of Bank_____City/Sate_____
List two charge accounts/loans
1._____2._____

List two relatives (Not) Living with you:
1. Name_____Relationship_____
Address_____Phone#_____
City_____State_____Zip_____
2. Name_____Relationship_____
Address_____Phone#_____
City_____State_____Zip_____

THE UNDERSIGNED REPRESENTS THAT THE ABOVE STATEMENTS ARE TRUE AND COMPLETE AND AUTHORIZES VERIFICATION OF THE ABOVE INFORMATION AND REFERENCES GIVEN.
APPLICANT'S Signature_____Date_____
SPOUSE 'S Signature_____Date_____