

Rental Application
516 St. Johns, LLC
Renaissance Apartments

Address applying for _____

Name _____ SS# _____ Date of birth _____

Street Address _____

City _____ State _____ Zip _____

Phone # _____ Drivers License # _____ State _____

Have you ever been convicted of a felony? Yes/No, If Yes please explain _____

Present Landlord _____

Street Address _____ City _____ State _____

Zip _____ Phone # _____

Employer _____

Street Address _____ City _____ State _____ Zip _____

Phone # _____

Position held _____ Supervisor's Name _____

Monthly Salary \$ _____

The applicant gives to 516 St. Johns, LLC the right to obtain credit information and verify references.

Signature _____

Date _____