



Colonial Investment & Management Company, Inc.

Suite 2-C Treadway Towers
9 East Loockerman Street
Dover, Delaware 19901
302-736-0674

RENTAL APPLICATION

For office Use Only
Date _____ Rent \$ _____
Property _____ Apt _____
Approved by: _____

Please complete a separate application for each person who is to be on the Lease, and complete all the requested information. Thank You for your interest in our apartments.

Date of Application _____ Desired Date of Occupancy _____
Apartment Complex _____ Bedrooms/Baths _____

Personal Information

Applicants Full Name _____ Date of Birth _____
Social Security Number _____ E-mail _____
Driver's License Number _____ Driver's License State _____
Work Phone _____ Cell Phone _____

Full Names of Other Residents	Relationship to You	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____

How many pets do you or other residents own? _____ Kind of Pet _____
Breed _____ Weight _____ Age _____
How did you hear about our property? _____

Residence History

Present Address: Street _____ Apt # _____
City _____ State _____ Zip _____
Dates From _____ To _____ Home Telephone _____
Present Landlord/Mortgage Co. _____ Phone _____
Monthly Payment \$ _____ Reason for Moving _____

Previous Address: Street _____ Apt # _____
City _____ State _____ Zip _____
Dates From _____ To _____
Previous Landlord/Mortgage Co. _____ Phone _____
Monthly Payment \$ _____ Reason for Moving _____

Vehicle Information

Make/Model _____ Year _____ Color _____ Tag No./State _____
Make/Model _____ Year _____ Color _____ Tag No./State _____

Employment Information

Present Employer _____ From _____ To _____
Employer Address _____
Position _____ Supervisor _____
Phone _____ Gross Monthly Salary \$ _____

Previous Employer _____ From _____ To _____
Employer's Address _____
Position _____ Supervisor _____
Phone _____ Gross Monthly Salary \$ _____

Other Information

HAVE YOU EVER: Been sued for non-payment of rent? _____ Yes/_____ No
Been evicted or asked to move out? _____ Yes/_____ No
Broken a Lease or Rental Agreement? _____ Yes/_____ No
Been sued for Damage to Rental Property? _____ Yes/_____ No
Declared Bankruptcy? _____ Yes/_____ No

In Case of Personal Emergency, Notify:

Name _____ Relationship _____
Address Street _____
City _____ State _____ Zip _____
Home Phone _____ Work Phone _____

Tenant Release Form

I hereby grant Colonial Investment and Management Company, Inc., and its designee, First American Registry, Inc., a credit-reporting agency, the right to process this credit application for the purpose of obtaining a rental lease.

In compliance with the FAIR CREDIT REPORTING ACT, this notice is to inform you that the processing of this application includes but is not limited to making inquiries deemed necessary to verify the accuracy of the information herein, including procuring consumer reports from consumer reporting agencies, obtaining credit information from other credit institutions and criminal background checks from appropriate law enforcement agencies.

You have the right to make a written request within a reasonable period of time to receive additional information about the nature of this investigation.

The undersigned agrees that this application shall remain the property of the apartment complex, landlord or realtor regardless if rental lease is granted.

**I am enclosing \$50.00 ___ Check ___ Money Order
payable to Colonial Investment
for processing my application**

Date

Applicant Signature (Required to Process)