



MINIMUM REQUIREMENTS:

(6) Months Rental History, (6) Months Current Employment history, Photo ID, \$25.00 Application Fee (no checks, money order or exact change ONLY), & Full Month Proof of income. Income total must equal double the amount of rent. **All items MUST be turned in with Application before it can be**

Application for Rental

Property Applying For: _____

Rent Amount: _____ Date: _____

Name: _____ Date of Birth: _____ Current Phone: _____

Last 4 Digits of Social Security #: _____ Mother's Maiden Name: _____

Driver's License #: _____ State of Registration: _____

Total Monthly Household Income: _____

Email: _____

Current Information

Present Address: _____ Monthly Rent Amount: \$ _____

Name of Apt. Complex: _____ Circle One: Rent Own

Name of Landlord: _____ How Long? _____

Landlord's Phone #: _____ Dates in Residence: _____

Employed By: _____ Phone: _____

Position: _____ How Long? _____

Address: _____

Children's Name(s) & Ages: _____

Pets: Yes No Types of Pets _____

Will anyone other than those listed above occupy the property with you? * Yes No

*NOTE: Any other person desiring to live on the property must complete a separate application. If Yes, Name(s): _____

Previous History

Present Address: _____ Monthly Rent Amount: \$ _____

Name of Apt. Complex: _____ Circle One: Rent Own

Name of Landlord: _____ How Long? _____

Landlord's Phone #: _____ Dates in Residence: _____

Please Turn Over and Continue to Fill Out Application on Back

Additional History

Present Address: _____ Monthly Rent Amount: \$ _____
Name of Apt. Complex: _____ Circle One: Rent Own
Name of Landlord: _____ How Long? _____
Landlord's Phone #: _____ Dates in Residence: _____

Auto Information

How many autos (including company cars) will you keep at this address? _____
Make, Year, Color, License #: _____
Make, Year, Color, License #: _____

Other References (2 Professional, 1 Personal)

Name, Relationship: _____ Phone: _____
Name, Relationship: _____ Phone: _____
Name, Relationship: _____ Phone: _____

Please complete this application with all pertinent details. The information requested provides the basis for our selection of the best neighbors for you and all our residents. If accepted, this application will become part of the lease.

This application is made with the understanding that it is subject to acceptance by the owner and subject to execution by an officer of Landmark Real Estate & Investment, Inc, and delivery of a lease covering said premises.

By signing this application, you have given Landmark Real Estate & Investment, Inc. permission to obtain information from the parties listed above.

Applicant Signature: _____

***Please Note That Failure to Fully Complete This Form Can Result in Disqualification of**

Application* In case of Emergency, who can we contact:

Name: _____

Phone: _____

Relationship: _____

407 E. LOHMAN AVE. · LAS CRUCES, NEW MEXICO 88001 · (575) 525-8114

FAX (575) 525-8115 · EMAIL landmark@investlascruces.com

WEBSITE: www.investlascruces.com