

RENTAL CREDIT APPLICATION

Name _____	Delivery Date _____
Social Security # _____	Lease Length _____
Date of Birth _____	Employer _____
Phone # _____	Employer Phone # _____
Cell Phone # _____	Email _____

Delivery Address _____	Apartment Community _____
City/State/Zip _____	Phone # _____
Apartment # _____	Is lease in your name? _____

Previous Address _____	Permanent Address _____
City/State/Zip _____	City/State/Zip _____
Apartment # _____	Apartment # _____

EMERGENCY CONTACT/REFERENCE

Name _____	Address _____
Phone # _____	City/State/Zip _____
Cell Phone # _____	Apartment # _____

HOW DID YOU HEAR ABOUT US

Internet Search
 Friend
 Rental Guide
 Other _____

Apartment Community Name _____

City/State/Zip _____

The information included in the application has been submitted for the purpose of leasing furniture and/or other merchandise from ASTRA/BI-STATE. I hereby certify that I am eighteen years of age or older. I hereby certify that everything stated on this application is true and correct and I understand that falsifying information is grounds for refusal of services by ASTRA/BI-STATE. I hereby certify that the rental agreement will not become effective until this application is approved and the lease agreement has been signed. I hereby give ASTRA/BI-STATE authorization to check my credit history and employment history with the information I have provided.

Applicant Signature _____
 ASTRA/BI-STATE Rep _____

Date _____
 Approved By _____