



## **Personal Information Sheet**

Location applying for: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Driver License Number: \_\_\_\_\_ State: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Spouse's Social Security Number: \_\_\_\_\_

Present Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Current Landlord: \_\_\_\_\_ Phone: \_\_\_\_\_

How long have you resided at this address: \_\_\_\_\_ Current Rent: \_\_\_\_\_ Number of Occupants: \_\_\_\_\_

Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name & Address of Your Parents: \_\_\_\_\_

Phone: \_\_\_\_\_

Name & Address of Your Current Employer: \_\_\_\_\_

Phone: \_\_\_\_\_

Gross Monthly Income: \_\_\_\_\_ If not employed, other sources of income: \_\_\_\_\_

Name & Address of Spouse's Employer (if applicable): \_\_\_\_\_

Phone: \_\_\_\_\_

Number of auto(s) you will have: \_\_\_\_\_ Make & License: \_\_\_\_\_

Student: \_\_\_\_\_ Where: \_\_\_\_\_ Year: \_\_\_\_\_ Department: \_\_\_\_\_

Pets: \_\_\_\_\_

The applicant hereby authorizes Owner/Owner's Agent to conduct a credit check, which includes, but is not limited to obtaining a credit report and interviewing applicant's references and/or previous landlords. The applicant hereby consents to the credit check process and authorizes any individual listed in this application to speak with Owner/Owner's Agent regarding applicant's present or previous credit performance, and further allows said company to run a credit check for collection purposes. Applicant further releases any and all individuals who provide information to Owner/Owner's Agent from any and all claims which applicant may have resulting from information provided to Owner/Owner's Agent. The applicant also authorizes release of information based upon reliance upon either photocopies or facsimiles of this authorization.

I hereby agree that if any information herein contained is false, the lease made on the strength of this application, may at the option of the Owner/Owner's Agent, be terminated at any time. This application is taken subject to approval of Owner/Owner's Agent.

Date: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

In case of emergency, call: \_\_\_\_\_ at: \_\_\_\_\_

How did you hear about us: \_\_\_\_\_

Please return this form to:

The Weiner Companies, Ltd.  
211 E. Green St, Urbana, IL 61801  
Ph: 217.384.8001 F: 217.384.2210  
**[www.weinercompanies.com](http://www.weinercompanies.com)**  
Email: info@weinercompanies.com