II & III Management, L.L.C. 17570 Metcalf Stilwell, KS 66085

Credit Application

Address Desired	Date Wanted	d:

Applicant 1

Applicant's Full Name:										
DOB: SSN:			Marital Status:							
Current Address:				Current Phone:						
Rent Own Other Explain:										
Landlord or Mortgage Holder's Name:										
Address:				Phone:						
How long at current address? Amount of				Rent or Mortgage Payment:						
Reason for moving:										
Previous Address:										
Rent Own Other Explain:										
Landlord or Mortgage Holder's Name:										
Address:			Phone:							
How long at this address? Amount of			Rent or Mortgage Payment:							
Reason for moving:										
Employer:				How long?						
Phone Number:	Phone Number: Supervisor:			Income:						
Auto Make/Model:	Year: Color			Tag #	State:					
Driver's License Number:				State:						
In case of emergency notify:				Relationship:						
Address:			Phone:							
Have you filed for Bankruptcy in the last 10 years? Was it Discharged? What Year?										
Have you ever owned a house that v	vas foreclosed or	n?								
Bank:	ank: Checking Savings			Account Number:						
Bank:	Checking Sa	avings	Account Number:							
Bank: Checking Savings			Account Number:							
Credit Reference:										
Credit Reference:										
I hereby make application for an apartment or other residence and certify that the above information is correct. I authorize you to contact any references I have listed.										
			X							

Submit this Application with copies of the following: 1. State issued Drivers License or I.D Card,

- 2. Check Stubs from the two most current pay periods
- 3. Social Security Card

Applicant 2

Applicant's Full Name:										
DOB: SSN:				Marital Status:						
Current Address:				Current Phone:						
Rent Own Other Explain:										
Landlord or Mortgage Holder's Name:										
Address:				Phone:						
How long at current address? Amount of F				ent or Mortgage Payment:						
Reason for moving:										
Previous Address:										
Rent Own Other Explain:										
Landlord or Mortgage Holder's Name:										
Address:				Phone:						
How long at this address? Amount of Rent or Mortgage Payment:										
Reason for moving:										
Employer:				How los	ng?					
Phone Number:	Superviso	or:				Incom	e:			
Auto Make/Model:	Year:		Color: Tag		Tag #		State:			
Driver's License Number:	-1				State:					
In case of emergency notify:				Relationship:						
Address:				Phone:						
Have you filed for Bankruptcy in the	last 10 year	rs?	Was i	t Dischar	rged?	What Ye	ar?			
Have you ever owned a house that wa	as foreclose	d on?								
Bank: Checking			ings 🗌	Account Number:						
Bank: Checking Savings			ings 🗌	Account Number:						
Bank: Checking Savings					Account Number:					
Credit Reference:										
Credit Reference:										
I hereby make application for an apartment or other residence and certify that the above information is										
correct. I authorize you to contact any references I have listed.										
			X							
Other Residents										
Name		Relationship				Age				
1,181110				г						

Trey McDonald, P.O. Box 26091 Overland Park, KS 66225 – Fax: (913) 814-7669 – Cell: (913) 710-9745

Submit this Application with copies of the following:

- 1. State issued Drivers License or I.D Card,
- 2. Check Stubs from the two most current pay periods
- 3. Social Security Card