II & III Management, L.L.C.

17570 Metcalf

Stilwell, KS 66085

**Credit Application**

|  |  |
| --- | --- |
| Address Desired: | Date Wanted: |

**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:       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 was foreclosed on? | | | | | |  | | | |
| Bank: | | Checking Savings | | | | Account Number: | | | |
| Bank: | | Checking Savings | | | | 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 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:       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 was foreclosed on? | | | | | | |  | | |
| Bank: | | Checking  Savings | | | | | Account Number: | | |
| Bank: | | Checking  Savings | | | | | 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 |
|  |  |  |
|  |  |  |
|  |  |  |

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

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