



Rental Application

737 Reba Place Basement Evanston, IL. 60202
 Ph 847-868-1464 Fax 847-388-8241

Applicant Information

ADDRESS APPLYING FOR:		EMAIL:
Full Legal Name:	DL #:	State:
Date of birth:	SSN:	Phone:
Current Address:	Landlord:	Phone:
City	State	ZIP Code:
Own Rent (Please circle)	Monthly Payment or Rent:	How long?
Previous Address:		
City:	State	ZIP Code
(please circle) Do you RENT or OWN?	Monthly Payment or Rent:	How long?

Employment Information

Current Employer:	Supervisor:				
Employer Address:	Date First Employed:				
City:	State:	ZIP Code:			
Phone:	E-mail:	Fax:			
Position:	Hourly Pay Rate:	OT Pay Rate:	Annual Salary:	Average HRS worked per week:	
(please circle one) Frequency of Pay	Daily-each day	Weekly-once per week	Bi-weekly-every other week	Semi monthly-twice per month	Monthly-once per month

Other income: (SSI, CHILD SUPPORT etc...)

fill out every line of this application or it will not be accepted.

Emergency Contact

Name of a person not residing with you:	Relationship:		
Address:			
City:	State:	ZIP Code:	Phone:

References(no relatives)

Name:	Relationship	Phone:

Have you ever been convicted of a crime? (yes/no) If so, please explain all the offenses including where, when and why:

Have you ever been sued for eviction (yes/no) If so, please explain where, when and why and provide case number(s):

Do you have pets?	If yes, what kind?
Do you or does anyone in your household smoke?	If yes, who?
Do you have any special housing needs?	

Names of persons who will occupy apartment:

I (We) understand that providing false information in this Application constitutes a default under the Lease, and may lead to termination of my (our) tenancy. I verify all application information to be true (signed by applicant)

_____ Date _____

rentals@rebaplacedevelopmentcorp.org

