

GRAHAM MANAGEMENT Rental Application & Credit Authorization

Applicant Name:		
ID /Driver's License Number:		SSN:
Date of Birth:	Phone:	Cellular:
Current address:		
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly Payment or Rent:	How long?
Employment Information		
Current Employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:
Previous Employer:		
Address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:
Name of a relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
Co-Applicant Information		
Name:		Phone:
Date of Birth:	SSN:	Cellular:
Current address:		ID/DL #:
City:	State:	ZIP Code:
Own Rent (Please circle)	Monthly Payment or Rent:	How long?

Co-Applicant Employment Information		
Current employer:		
Employer address:		How long?
Phone:	E-mail:	Fax:
City:	State:	ZIP Code:
Position:	Hourly Salary (Please circle)	Annual income:
Name of a relative not residing with you:		
Address:		Phone:
City:	State:	ZIP Code:
Relationship:		
Family / Pets		
Names & ages of all people who will be living in the unit:		
Names, breeds, and ages of all pets who will be living in the unit:		
Name:	Company/Relation:	Phone:
Name	Company/Relation:	Phone:
Other Assets or Sources of Income		
Description	Amount per month or value	
I authorize Graham Management to verify the information provided on this form as to my credit and employment history.		
Signature of applicant		Date
Signature of co-applicant		Date

You will need to provide Graham Management with a copy of your state issued ID and proof of employment / income.