Leaseholder-Agent, Occupant	APPLICATION	Today's Date

Leaseholder-Agent -Occupant Name	*Birthday*	*Zazu Use: Leasing Agent* *App Fee Paid by: cc mo dc ck* *Date & Rate Quoted:*	
Email Address	Cell Phone #	*Additional Occupants in Unit __YES __NO* NAME_____ STATUS_____ Non-Leaseholder Occupant* _____ Leaseholder* ___Minor *Additional Application Required	*Describe any Pets*
Current Employer & Position:	Since:	*Contact Phone/email to Verify Employment*	*Annual Salary*
Previous Employer if above is < 2 years:	Since:	*Contact Phone/email to Verify Employment*	*Annual Salary*
Leaseholder SS # or Passport #:	Passport Issuing Nation	*Lease Start Date* *Lease End Date*	*Floor Plan Selected*

PRESENT HOME ADDRESS (street , city, state, ZIP)	*PREVIOUS HOME ADDRESS (street, city, state, ZIP) if present is <2 years*
Street _____ Apt #_____	*Street _____ Apt #_____*
City _____State _____Zip_____	*City _____State _____Zip_____*
Since _____ __Rent or __Own __ Monthly Payment_____	*Since _____ __Rent or __Own __ Monthly Payment_____*
Landlord email / phone #	*Landlord email / phone #*

Have you ever been evicted from a rental unit? Yes_____ No_____ Explain:_____

Have you ever had bedbugs in a previous hotel or rental unit? No____ If Yes___, Please explain_____

Has there ever been a judgments or liens filed against your company in connection to a rental unit? Yes_____ No_____

Explain:_____

If you have previously leased any furnished units, please supply that information below

Furnished Housing leased from_____ to _____	**REQUESTS / SPECIAL REQUIREMENTS**
Street _____ Apt #_____	*Floor Preference___1st or___ 2nd or___ Bungalow* *Note any Special Requirements*_____
City _____State _____Zip_____	*After-hours check on_____at _____PM*
Landlord's Name _____& Contact Information:	*Additional items we should address* _____
Phone#_____EMAIL_____	_____

PLEASE READ CAREFULLY : Applicant represents that all of the above statements are true and complete, and hereby authorized verifications of above information **references and credit records. Applicant acknowledges that false information contained herein constitutes grounds for rejection of this application if discovered** before move in. Applicant acknowledges that management may not be able to complete comprehensive action of the Agreement before move in. Management reserves the right to verify application information after move-in and may convert the proposed Rent Agreement to a month-to-month term if misleading information is contained in this application. I warrant that all statements above set forth are true, however, should any statement made above be a misrepresentation or not a true statement of facts, I understand that two-hundred ($250.00) fifty dollars of any deposit will be retained to offset the agent's cost, time and effort in processing my application.

I recognize that as part of Zazu Pannee's application processing, an investigative consumer report may be prepared. I authorize all contacted sources to release information they may have about me and release them from any liability and responsibility from doing so. A photographic or faxed copy of this authorization shall be as valid as the original. I understand that I may have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of this investigation.

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Applicant's Signature Date

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