



# RENTAL APPLICATION

(620) 218-0512

APPLICANT INFORMATION			
FULL LEGAL NAME:	SS#:	MARRIED DIVORCED	SINGLE SEPARATED
DATE OF BIRTH:      AGE:	DL#:	CELL PHONE:	KID #1 NAME: AGE: M OR F
CURRENT ADDRESS: CITY: STATE:      ZIP:	HOW LONG AT CURRENT ADDRESS?	OWNED OR RENT  MONTHLY PAYMENT:	KID #2 NAME: AGE: M OR F
LANDLORD NAME:	LANDLORD PHONE #:	PET: WEIGHT:	BREED:  KID #3 NAME: AGE: M OR F
EMPLOYMENT INFORMATION			
CURRENT EMPLOYER:	ADDRESS:  CITY:  STATE:      ZIP:	PHONE:  E-MAIL:  FAX:	POSITION: HOURLY/SALARY: NET INCOME: HOW LONG EMPLOYED:
EMERGENCY CONTACT			
NAME OF A PERSON NOT RESIDING WITH YOU:	ADDRESS:	PHONE:	RELATIONSHIP:
REFERENCES			
NAME:  PHONE:	ADDRESS: CITY: STATE: ZIP:	NAME:  PHONE:	ADDRESS: CITY: STATE: ZIP:
NAME:  PHONE:	ADDRESS: CITY: STATE: ZIP:	NAME:  PHONE:	ADDRESS: CITY: STATE: ZIP:
Have you or any household members been convicted of felony within the last 5 years? Yes _____ or No _____  If yes, please indicate what the conviction was for:	I authorize the verification of the information provided on this form as to my credit and employment.	I authorize the sharing of information with other members of the Winfield Landlord Association.	I authorize MJ PROPERTY GROUP, LLC to obtain a Consumer Report.
SIGNATURE OF APPLICANT:			DATE:

Applying for \_\_\_\_\_ bedroom, \_\_\_\_\_ bathroom unit.  
Once application is filled out, please return via email  
or text to [mogojellings@yahoo.com](mailto:mogojellings@yahoo.com) or (620)218-0512.