

# Happy Home KY, LLC

## RESIDENTIAL RENTAL APPLICATION

Please return to: *leasing@happyhome-ky.com*

*Each co-applicant and each occupant 18 years old and over must submit a separate application. Spouses may submit a single application.*

**Date when filled out:** \_\_\_\_\_ **Desired Move-In Date:** \_\_\_\_\_

**Apartment Address:** \_\_\_\_\_

### **About You:**

Full name of Applicant (exactly as on driver's license or govt. ID card)

\_\_\_\_\_

Your street address (as shown on your driver's license or government ID card):

\_\_\_\_\_

Driver's License # and State: \_\_\_\_\_

Former last names (maiden and married): \_\_\_\_\_

Social Security # \_\_\_\_\_

Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Marital Status (Optional):  single  married  divorced  widowed  separated

Are you a US citizen?  Yes  No

Do you or any occupant smoke?  Yes  No

Will you or any occupant have an animal?  Yes  No

Kind, weight, breed, age: \_\_\_\_\_

\_\_\_\_\_

Current home address (where you live now):

\_\_\_\_\_

City/State/Zip \_\_\_\_\_

Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Current Rent: \$ \_\_\_\_\_

Email address: \_\_\_\_\_

Name of Apartment where you now live: \_\_\_\_\_

Current owner or manager's name: \_\_\_\_\_

Their email: \_\_\_\_\_

Their phone: \_\_\_\_\_ Date moved in: \_\_\_\_\_

Why are you leaving your current residence? \_\_\_\_\_

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Your previous home address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Name of Apartment or owner: \_\_\_\_\_

Manager's name: \_\_\_\_\_

Their email: \_\_\_\_\_

Their phone: \_\_\_\_\_ Previous rent: \$ \_\_\_\_\_

Date moved in: \_\_\_\_\_ Date moved out: \_\_\_\_\_

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**Your Work:**

Present employer: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Position \_\_\_\_\_

Gross annual income was over: \$ \_\_\_\_\_

Dates you began this job: \_\_\_\_\_

Supervisor name and phone number: \_\_\_\_\_

Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_

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Previous employer: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Position \_\_\_\_\_

Gross annual income was over: \$ \_\_\_\_\_

Dates you began and ended this job: \_\_\_\_\_

Supervisor name and phone number: \_\_\_\_\_

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**Your Credit History:**

Your bank's name, city, state: \_\_\_\_\_

List major credit cards: \_\_\_\_\_

Other non-work income you want considered. Please explain: \_\_\_\_\_

\_\_\_\_\_

Past credit problems you want to explain: \_\_\_\_\_

\_\_\_\_\_

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**Why you applied here:**

Were you referred?     Yes    No    If yes, by whom? \_\_\_\_\_

If you found us on your own, where did you first hear about us?

\_\_\_\_\_

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Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**Your rental / Criminal history:**

*Check only if applicable.* Have you, your spouse, or any occupant listed in this Application ever:  
 been evicted or asked to move out?  moved out of a dwelling before the end of the lease term without the owner's consent?  declared bankruptcy?  been sued for rent?  been sued for property damage?  been charged, detained, or arrested for a felony, misdemeanor, involving a controlled substance, violence to another person or destruction of property, or a sex crime that was resolved by conviction, probation, deferred adjudication, court ordered community supervision, or pretrial diversion?  been charged, detained, or arrested for a felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or a sex crime that has not been resolved by any method? Please indicate below the year, location, and type of each felony, misdemeanor involving a controlled substance, violence to another person or destruction of property, or sex crime other than those resolved by dismissal or acquittal. We may need to discuss more facts before marking a decision. *You represent the answer is "no" to any item not checked above.*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Your spouse / Additional Tenant:**

Full name (exactly as on driver's license or govt. ID card)

\_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Driver's License # and State: \_\_\_\_\_

Former last names (maiden and married): \_\_\_\_\_

Social Security # \_\_\_\_\_

Birthdate: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Are you a US citizen?  Yes  No

Do you smoke?  Yes  No

Present employer: \_\_\_\_\_

Address: \_\_\_\_\_

City / State / Zip: \_\_\_\_\_

Work Phone: (\_\_\_\_) \_\_\_\_\_

Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_

Position \_\_\_\_\_

Gross annual income was over: \$ \_\_\_\_\_

Dates you began this job: \_\_\_\_\_

Supervisor name and phone number: \_\_\_\_\_

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**Other Occupants:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: \_\_\_\_\_ DL or govt. ID card # and state: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: \_\_\_\_\_ DL or govt. ID card # and state: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Sex: \_\_\_\_\_ DL or govt. ID card # and state: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

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**Your Vehicles:**

*List all vehicles owned or operated by you, your spouse, or any occupants (including cars, trucks, motorcycles, trailers, etc.). Continue on separate page if more than three.*

Make and color of vehicle: \_\_\_\_\_

Year: \_\_\_\_\_ License plate: \_\_\_\_\_ State: \_\_\_\_\_

Make and color of vehicle: \_\_\_\_\_

Year: \_\_\_\_\_ License plate: \_\_\_\_\_ State: \_\_\_\_\_

Make and color of vehicle: \_\_\_\_\_

Year: \_\_\_\_\_ License plate: \_\_\_\_\_ State: \_\_\_\_\_

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Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**Emergency:**

*Emergency contact person over 18, who will not be living with you:*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email address: \_\_\_\_\_

Relationship: \_\_\_\_\_

**Authorization:**

I or we authorize owner, Happy Home KY, LLC, to obtain reports from any consumer or criminal record reporting agencies before, during, and after tenancy on matters relating to a lease by the above owner to me and to verify, by all available means, the information in this application, including criminal background information, income history and other information reported by employer(s) to any state employment security agency. Work history information may be used only for this Rental Application. Authority to obtain work history information expires 365 days from the date of this Application.

I or we represent that the information provided in this application is true to the best of my knowledge.

I or we authorize, Happy Home KY, LLC, to charge the below credit card Forty Five Dollars (\$ 45.00) to cover the cost of the application process.

Credit Card Number: \_\_\_\_\_

Expiration (MM/YY): \_\_\_\_\_

Credit Card billing address zip code: \_\_\_\_\_ Card Security Code: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse/Other Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Initials: \_\_\_\_\_ Date: \_\_\_\_\_