



4033 W Charleston Blvd. Las Vegas, NV 89102
Phone (725) 244-4700 • Fax (725) 244-4799

RENTAL APPLICATION

- DO NOT type your application, we prefer it to be filled out by hand.
- DO NOT write on the back of the form. If you would like to provide additional information please do so, on a separate page.
- All required initials & signatures must be provided. If you fail to initial or sign, we cannot process the application.
- Applications are to be dropped off at our office located at:

4033 W Charleston Blvd Las Vegas NV, 89102

Please provide the following with your application:

- Copy of identification for all ADULT applicants
- Seventy-five-dollar (\$75) application fee, *per applicant 18 & over*

Money order, Cashiers Check, or exact Cash accepted

Make payable to Americana Property Mgmt.

APPLICATION FEE IS NON-REFUNDABLE- Initials _____

- Proof of income for the two (2) most recent months

Pay-Stubs or Bank Statements

If self-employed, most recent 1099

Failure to give accurate or incomplete information is grounds for denying your application.

***** ALLOW 24-72 HOURS FOR PROCESSING*****

RENTAL APPLICATION

NOTICE: THIS APPLICATION WILL NOT BE PROCESSED UNLESS INITIALED & SIGNED BY ALL APPLICANTS.

In the event of co-applicant, other than a spouse, use additional forms.

Move-in Requested Date: _____

RENTAL PROPERTY					
PROPERTY ADDRESS:	STREET	UNIT	CITY	STATE	ZIP

APPLICANT INFORMATION					
LAST NAME	FIRST NAME	M.I.	ALIAS		
BIRTH DATE		DRIVERS LICENSE NO.	STATE	SOCIAL SECURITY/ ITIN NO.	
HOME PHONE	WORK PHONE		EMAIL		

2 ND APPLICANT INFORMATION					
LAST NAME	FIRST NAME	M.I.	ALIAS		
BIRTH DATE		DRIVERS LICENSE #	STATE	SOCIAL SECURITY/ ITIN NO.	
HOME PHONE	WORK PHONE		EMAIL		

OTHER OCCUPANTS <i>LIST ALL ADDITIONAL OCCUPANTS</i>					
LAST NAME	FIRST NAME	M.I.	BIRTH DATE	RELATIONSHIP	
LAST NAME	FIRST NAME	M.I.	BIRTH DATE	RELATIONSHIP	
LAST NAME	FIRST NAME	M.I.	BIRTH DATE	RELATIONSHIP	
LAST NAME	FIRST NAME	M.I.	BIRTH DATE	RELATIONSHIP	
LAST NAME	FIRST NAME	M.I.	BIRTH DATE	RELATIONSHIP	

RESIDENTIAL HISTORY <i>PLEASE PROVIDE RENTAL HISTORY FOR THE LAST 5 YEARS</i>					
CURRENT RESIDENCE					
PRESENT ADDRESS:	STREET	UNIT	CITY	STATE	ZIP
MONTHLY PAYMENT	<input type="checkbox"/> Own <input type="checkbox"/> Rent	HOW LONG?	REASON FOR LEAVING		
NAME OF LANDLORD: <input type="checkbox"/> Mortgage Co. <input type="checkbox"/> Apt Complex			PHONE NO.	EMAIL	
PREVIOUS RESIDENCE					
PREVIOUS ADDRESS:	STREET	UNIT	CITY	STATE	ZIP
MONTHLY PAYMENT	<input type="checkbox"/> Own <input type="checkbox"/> Rent	HOW LONG?	REASON FOR LEAVING		
NAME OF LANDLORD: <input type="checkbox"/> Mortgage Co. <input type="checkbox"/> Apt Complex			PHONE NO.	EMAIL	

Initials _____ Date _____

RENTAL APPLICATION

EMPLOYMENT HISTORY PLEASE PROVIDE EMPLOYMENT HISTORY FOR THE LAST 5 YEARS

CURRENT EMPLOYER

EMPLOYER NAME		SUPERVISOR NAME			
EMPLOYER ADDRESS :	STREET	UNIT	CITY	STATE	ZIP
PHONE	FAX		EMAIL		
POSITION HELD/OCCOUPATION		HOW LONG? Yrs. Mos.	SALARY	Circle one : MONTHLY WEEKLY BI-WEEKLY	

PREVIOUS EMPLOYER

EMPLOYER NAME		SUPERVISOR NAME			
EMPLOYER ADDRESS:	STREET	UNIT	CITY	STATE	ZIP
PHONE	FAX		EMAIL		
POSITION HELD/OCCOUPATION		HOW LONG? Yrs. Mos.	SALARY	Circle one : MONTHLY WEEKLY BI-WEEKLY	

ADDITIONAL INCOME SOURCE

Income such as child support, alimony, or separate maintenance need not to be disclosed unless such income is to be included for qualification hereunder.

SOURCE	AMOUNT RECEIVED	Circle one : MONTHLY WEEKLY BI-WEEKLY
SOURCE	AMOUNT RECEIVED	Circle one : MONTHLY WEEKLY BI-WEEKLY

BANKING & CREDIT REFERENCES

CHECKING/ SAVINGS	BANK NAME	ACCOUNT #
CREDIT CARD	BANK NAME	ACCOUNT#
LOAN	BANK/ LENDER NAME	ACCOUNT #

Have you ever filed for Bankruptcy? Yes _____ No _____

If yes, when? Explain. _____

Has your bankruptcy been discharged ? Yes _____ No _____

Has Applicant ever willfully refused to pay rent? Yes _____ No _____

If yes, when? Explain. _____

Has Applicant ever been evicted ? Yes _____ No _____

If yes, when? Explain. _____

Initials _____ Date _____

RENTAL APPLICATION

EMERGENCY CONTACT		
NAME	PHONE	RELATIONSHIP
ADDRESS		
NAME	PHONE	RELATIONSHIP
ADDRESS		

VEHICLE INFORMATION				
1.MAKE/MODEL	COLOR	YEAR	LICENSE NO.	STATE
2.MAKE/MODEL	COLOR	YEAR	LICENSE NO.	STATE
3.MAKE/MODEL	COLOR	YEAR	LICENSE NO.	STATE

PETS Yes___ No___				
An additional deposit is required for <i>each</i> pet. Photos required.				
NAME	TYPE/BREED	Sex M F	WEIGHT (Lbs)	AGE
NAME	TYPE/BREED	Sex M F	WEIGHT (Lbs)	AGE
NAME	TYPE/BREED	Sex M F	WEIGHT (Lbs)	AGE

SERVICE ANIMAL DISCLOSURE
<p>Are any of the animals listed above registered as a SERVICE ANIMAL? Yes___ No___</p> <p>You MUST be able to provide documentation from your health care provider that your animal provides necessary support, assistance, or services. Service animals will not be subject to a pet deposit and/or pet rent.</p>

OTHER INFORMATION
<p>Does the applicant plan on using liquid furniture? Yes___ No___</p> <p>If yes, explain: _____</p>
<p>Has applicant(s) or occupant ever been convicted of a gross misdemeanor or felony? Yes___ No___</p> <p>Explain: _____</p>

Initials _____ Date _____

APPLICATION DISCLOSURE

READ CAREFULLY BEFORE SIGNING

1. Applicant(s) understands that they acquire no rights in a unit/apartment/property until they sign this agreement and submit a holding fee/deposit in the amount of \$ _____ upon approval of tenancy and the signing of a consideration for the landlord holding the property located at: _____ on applicants behalf, applicant waives all rights to the return of said holding fee/deposit and said fee shall be returned to the applicant.
2. Applicant agrees to pay a non-refundable application/credit check fee of \$ _____.
3. Applicant agrees to execute a rental agreement before possession to the property is given and to pay the rent and security deposit within business days after being notified of acceptance of this application.
4. Landlord and agent will not be bound by any representations, agreements or promises, written or oral, made by landlord or agent unless contained in the rental/lease agreement signed by landlord or landlord's agent.
5. Applicant authorizes Americana Property Mgmt. & Real Estate and its agents/employees to obtain credit reports, character reports and verification of rental history as necessary to verify all information in this application for tenancy. Applicant does hereby release landlord, agent and this company from any and all damages or liabilities which might result from the above information. Applicant releases present landlord and all previous landlords or reporting agencies from any and all liability for any damage or injury whatsoever caused by providing information to landlord or agent regarding applicant or occupants.
6. Applicant understands and acknowledges that a false statement made herein is grounds for denial of rental to the applicant (s). Any statement herein may be construed as a condition precedent to any binding rental/lease agreement or contract between applicant and landlord. Applicant certifies that to the best of their knowledge all statements are true and complete.
7. Approval for residency is made without regard to race, color, religion, sex, nationality origin, age or handicap.

Incompliance with State and Federal Law, this is to inform you that an investigation involving the statements made on your rental application is being initiated. You have the right to dispute the information reported. Direct your inquiries to Americana Property Mgmt. & Real Estate. All or part of the above information may be made available to other services unless this Box [] is checked. False, fraudulent or misleading information, criminal convictions, or poor rental or credit history may be grounds for denial of tenancy, or subsequent eviction.

APPLICANT(S) SIGNATURE

PRINTED NAME <i>(Applicant)</i>	SIGNATURE	DATE
PRINTED NAME <i>(Applicant)</i>	SIGNATURE	DATE

FOR REFERRING AGENT ONLY

Company: _____
Referring Agent: _____
PID: _____



4033 W Charleston Blvd. Las Vegas, NV 89102
Phone (725) 244-4700 • Fax (725) 244-4799

Date: _____

Prospective tenant for the property located at: _____

Permissions to Release Criminal History

Under Nevada Revised Statutes, NRS 179A.100.1, Americana Prop. Mgmt. & Real Estate LLC may request records of criminal history (or the absence thereof) about any **prospective** tenant. What may be released by any agency of criminal justice without any restrictions are: any record reflecting a conviction and/or any record which pertains to an incident for which a person is currently within the system of criminal justice. **This information is to be used by the Americana Prop. Mgmt. & Real Estate LLC only and will not be disseminated to any other person(s), apartment complexes, or management companies.**

As a routine policy, we request any prospective tenant to grant us a release. We are not required under the law to get a release but want you to know that we routinely get the criminal information or lack thereof from a police agency in order to protect our clients and the public.

Permissions to Release Information

In compliance with State and Federal Laws, this is to inform you that an investigation involving the statements made on your rental application for tenancy at the above-mentioned property is being initiated. You have the right to dispute the information reported. Direct inquires to Americana Prop. Mgmt. & Real Estate LLC, 4033 W Charleston Blvd, Las Vegas, NV 89102. All or part of the above information may be made available to other services unless this box () is checked. I/We certify that to obtain credit reports, character reports, verification of rental history and employment history as necessary to verify all information in the above referenced application for tenancy. False, fraudulent or misleading information, criminal convictions, or poor rental or credit history may be grounds for denial of tenancy, or subsequent evictions.

Granting the release is a condition contingent to your completed application to be considered for tenancy in any property that is handled by Americana Prop. Mgmt. & Real Estate LLC.

RELEASE AUTHORIZATION

(To be signed by each prospective tenant age 18 years or older)

Printed Name: _____ Alias: _____

Signature: _____ Date Signed: _____

Date of Birth: _____ Social Security Number: _____

Present Address: _____

Driver's License Number: _____ State: _____

FOR OFFICE USE ONLY

Information Released By: _____ ID#: _____
(Authorized Employee)

Date Information Released: _____

Attach copy of information released to this form.