

Apartment Address: _____ Flr/Apt #: _____ Rent \$ _____

(check appropriate) STUDIO_____ 1BDRM_____ 2BDRM_____

SUBLET_____ OR REGULAR 1 YR LEASE_____

Date Wanted: _____

Applicant Information:

Name (First)			(Middle)			(Last)			
Birth Date				SSN #			Marital Status		
YOUR Cell #				Home Phone:			E-Mail:		
Own Furniture? <input type="checkbox"/> Yes <input type="checkbox"/> No				High School <i>(Include City and State)</i>			College <i>(if applicable; include City and State)</i>		
# of People to Occupy Apartment:				Children? <i>(Names/Ages):</i>			Pets? # & Type:		

*Dogs are NOT allowed except as medically necessary, under law *

Current Residence:

Current Address				Apartment #			
City		State		Zip Code			
Landlord Contact/Name:		Phone <i>(daytime/cell for Landlord)</i>		Phone <i>(evening... for Landlord)</i>			
Landlord E-mail address (if available)		Monthly Payment or Rent:		Length of Time at Residence			
Reason for Leaving:							

Previous Residence:

Previous Address				Apartment #			
City		State		Zip Code			
Landlord Contact/Name:		Phone <i>(daytime/cell for Landlord)</i>		Phone <i>(evening... for Landlord)</i>			
Landlord E-mail address (if available)		Monthly Payment or Rent:		Length of Time at Residence			
Reason for Leaving:							

Current Employment Information:

Company Name:		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Salary <i>(average monthly NET):</i>			
Employer Address:		City		State		Zip Code	
Supervisor/Contact:		Supervisor Phone:		Fax:			
Length of time at Company:		Supervisor e-mail:		Your work e-mail:			
Comments:				Your Work Phone #:			

Previous Employment Information:

Previous Company Name:		<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Salary <i>(average monthly):</i>			
Employer Address:		City		State		Zip Code	
Supervisor/Contact:		Supervisor Phone:		Fax:			
Length of time at Company:		Supervisor e-mail:					
Reason for Leaving:							

Automobile/Vehicle Registration			
Driver’s License Number:	State	License Plate Number:	
Make/Model	Color	Year	
Bank Information			
Savings Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank Name:	City:	
Checking Account <input type="checkbox"/> Yes <input type="checkbox"/> No	Bank Name:	City:	
REFERENCES: (No relatives, please; Personal Friends Preferred)			
Name	Address	Cell &Home Phone/E-mail	Relationship
IMPORTANT - EMERGENCY CONTACT INFORMATION:			
Emergency Contact Name:	Home Phone AND Cell Number(s):	Relationship:	
I LEARNED ABOUT THIS APARTMENT THROUGH...			
<input type="checkbox"/> Our Website: (www.TheSchirmFirm.com)			
<input type="checkbox"/> Chicago Reader – Online <input type="checkbox"/> Chicago Reader—Print <input type="checkbox"/> Craig’s List <input type="checkbox"/> Rent.com			
<input type="checkbox"/> Google Ad <input type="checkbox"/> Facebook <input type="checkbox"/> Lincoln Square Chamber Of Commerce Website			
<input type="checkbox"/> Friend – (Please give Name): _____			
<input type="checkbox"/> For Rent Sign <input type="checkbox"/> Building Walk- By <input type="checkbox"/> Other – Please Specify: _____			
--THIS APPLICATION IS NOT BINDING ON ANY PARTY--			
A \$35.00 NON-REFUNDABLE APPLICATION FEE PER APPLICANT IS REQUIRED TO PROCESS APPLICATION			
** PHOTO ID (Driver’s License/State ID) MUST BE PROVIDED AT TIME OF APPLICATION (COPY WILL BE MADE).**			
If a lease-signing occurs: \$500.00 non refundable move in fee for single tenant, \$350.00 per tenant (2 or more) and First Rent monies must be paid by either a MONEY ORDER or BANK CHECK at time of signing. Personal Checks will not be accepted for first transaction/signing. Cash payments are <u>not</u> accepted at any time.			
HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A MISDEMEANOR? <input type="checkbox"/> Yes <input type="checkbox"/> No If “yes”, please explain: _____			
OFFICE: 7344 N. Western Avenue, Chicago, IL 60645-1814 PHONE: (773) 381-0150 FAX: (773) 381-0630 email: greatapartments@schirmfirm.com WEBSITE: www.TheSchirmFirm.com			
BY SIGNING THIS APPLICATION, I AUTHORIZE CONTACT OF ALL THE ABOVE-LISTED AGENCIES AND PARTIES, AS WELL AS THE USE OF CREDIT AND CRIMINAL REPORTING AGENCIES TO PROVIDE OFFICE WITH A CONFIDENTIAL CREDIT/CRIMINAL REPORT.			
APPLICANT’S SIGNATURE:_____		DATE:_____	

Should this application be accepted, the signed Lease and nonrefundable move in fee of \$500.00 for single tenant, \$350.00 each (2 or more) must be remitted to Lessor in Money Order within 2 business days after notification of acceptance by Lessor. Failure to remit may result in a rejection of the application. Should applicant fail to enter into the signed Lease Agreement, Lessor shall retain the nonrefundable move in fee(s) as liquidated damages.