

Only quality tenants need apply.

IndyLease.com					
4000 W 106 th St Suite 160-401, Carmel, IN 46032 Phone (317) 888-1130, Fax (317) 245-2337					
Property Address:			Projected Move-in date if Accepted:		
Name 1:			SSN:	DOB:	
Present Address:					
Home Phone:	Work Phone:	Cell Phone:		e-mail:	
Current Rent: \$ /month	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order	# Years:	Was Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for leaving:	
Current Employment:			Years in field:		
Employer, Address:	Length of Employment:		Pay	Minimum # Hours	OT Available? <input type="checkbox"/> Yes <input type="checkbox"/> No
Owe child support or alimony: <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ /month		Receive child support or alimony: <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ /month
Have you been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you Filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Foreclosure? <input type="checkbox"/> Yes <input type="checkbox"/> No		
When ?	When ?		When ?		
Name 2:			SSN:	DOB:	
Present Address:					
Home Phone:	Work Phone:	Cell Phone:		e-mail:	
Current Rent: \$ /month	<input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> Money Order	# Years:	Was Notice Given? <input type="checkbox"/> Yes <input type="checkbox"/> No	Reason for leaving:	
Current Employment:			Years in field:		
Employer, Address:	Length of Employment:		Pay	Minimum # Hours	OT Available? <input type="checkbox"/> Yes <input type="checkbox"/> No
Owe child support or alimony: <input type="checkbox"/> Yes <input type="checkbox"/> No	\$ /month		Receive child support or alimony: <input type="checkbox"/> Yes <input type="checkbox"/> No		\$ /month
Have you been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you Filed Bankruptcy? <input type="checkbox"/> Yes <input type="checkbox"/> No		Foreclosure? <input type="checkbox"/> Yes <input type="checkbox"/> No		
When ?	When ?		When ?		
Do you have pets? <input type="checkbox"/> Yes <input type="checkbox"/> No			Description:		
Emergency contact:			Address:		
Home Phone:	Work Phone:	Cell Phone:		e-mail:	
Any deposit or option consideration given in connection with the property listed above will be non-refundable. The information on this application form is strictly confidential and will be kept so by the management. The applicant agrees to allow a full credit examination and hereby authorizes management to contact any agencies, offices, groups, organizations or references listed to obtain and verify any information or materials which is deemed necessary to complete my application and/or an annual basis to evaluate for renewal consideration or to assist in contacting me should it become necessary to locate me relevant to matters involved in this tenancy. I do state the statements given above are correct under Penalty of Perjury. I further agree that Lessor may terminate any lease if any false statements have been made.					
Signature:			Signature:		Date: