

TENANT SUMMARY INFORMATION
(EA PARTY OVER 18 MUST COMPLETE THIS FORM)

CURRENT DATE: _____
TIMING OF MOVE IN REQUESTED: _____
LOCATION/SUBDIVISION: _____
RENT AMOUNT: _____ BEDROOMS _____ BATHS _____
OTHER UNIQUE NEEDS:

REASON FOR MOVING:

APPLICANT: NAME _____ D.O.B. _____
SS# _____ DRIVER LICENSE# _____
CELL PHONE # _____ WORK PHONE _____
HOME PHONE _____ EMAIL _____
CURRENT ADDRESS _____
RENT OR OWN (circle one) RENT AMOUNT PAID _____
LANDLORD NAME & PHONE _____
NUMBER OF YEARS AT THE ABOVE ADDRESS _____
PLACE OF EMPLOYMENT _____
ADDRESS _____ PHONE # _____
SUPERVISOR NAME _____ YEARS ON THE JOB _____
JOB TELEPHONE: _____
EMERGENCY CONTACT: NAME _____ PHONE# _____
RELATIONSHIP TO YOU: _____

CO-APPLICANT: NAME _____ D.O.B. _____
SS# _____ DRIVER LICENSE# _____
CELL PHONE # _____ WORK PHONE _____
HOME PHONE _____ EMAIL _____
CURRENT ADDRESS _____
RENT OR OWN (circle one) RENT AMOUNT PAID _____
LANDLORD NAME & PHONE _____
NUMBER OF YEARS AT THE ABOVE ADDRESS _____
PLACE OF EMPLOYMENT _____
ADDRESS _____ PHONE # _____
SUPERVISOR NAME _____ YEARS ON THE JOB _____
JOB TELEPHONE: _____
EMERGENCY CONTACT: NAME _____ PHONE# _____
RELATIONSHIP TO YOU: _____

Tenant

OTHER PEOPLE THAT WILL BE RESIDING IN PREMISES

NAME

D.O.B.

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

PETS YES / NO IF YES, DESCRIBE _____

ANY SMOKERS YES / NO _____

LUXOR HOMES, INC. AND ALL RELATED ENTITIES HAVE PERMISSION TO CONTACT ANY OF THE ABOVE SOURCES FOR VERIFICATION OF INFORMATION GIVEN. FALSE INFORMATION COULD LEAD TO TERMINATION OF LEASE.

APPLICANT SIGNATURE _____

PRINTED NAME _____

DATE _____

CO-APPLICANT SIGNATURE _____

PRINTED NAME _____

DATE _____