



ARDMORE • WINTHROP

Ardmore Winthrop Properties

5734 N. Winthrop Ave, #101
Chicago, IL 60660
(773) 271-4132
(773) 989-9190 – fax
ardmorewinthrop.com
office@ardmorewinthrop.com

Apartment Lease Application

Applicant Information:

Applicant Name: _____ Date _____
Phone Numbers: (home) _____ (cell) _____ (work) _____
Email address: _____
Social Security Number: _____ Date of birth: ____/____/____
Driver's License Number: _____ State: _____
How many in your family? Adults ____ Children ____ Pets ____

Apartment Information:

Rental unit applied for: Building: _____ Apartment #: _____
Desired date of occupancy: _____ Desired length of occupancy: _____

Present Address:

Street _____ Apt _____ City _____ State _____ Zip _____
How long have you lived at current address? From: ____/____/____ To: ____/____/____.
Rent \$ _____ Name of landlord: _____ Phone: _____
Why are you looking to move? _____

Prior Address:

Street _____ Apt _____ City _____ State _____ Zip _____
How long did you live at previous address? From: ____/____/____ To: ____/____/____.
Rent \$ _____ Name of Previous landlord: _____ Phone: _____

Current Employer:

Company: _____ Job Title: _____
Work Address: _____ Telephone: _____
From: ____/____/____ To: ____/____/____ Annual Salary: _____
Supervisor Name: _____ Phone#: _____
Second Employer (if applicable): _____ Annual Income _____

Bank Information:

Bank Name: _____ Checking Savings Other _____

Personal References (not related to you):

Name _____ Relationship _____ Phone _____
Name _____ Relationship _____ Phone _____

Education: Currently Enrolled Previously Enrolled

School: _____ Year: _____ Degree: _____ Date Attended _____

Other Information:

Do you want parking? Yes No

Number of vehicles (including company cars): _____

Make _____ Model _____ Yr ____ Color _____ License No. _____ State _____

SUV Midsize Compact Other _____

Have you ever filed for bankruptcy Yes No If yes, when? _____

Have you ever been served an eviction notice or been asked to vacate a property you were renting? Yes No

Have you ever willfully or intentionally refused to pay rent when due? Yes No

If yes, when? _____

Is there anything that may interrupt your income or ability to pay rent? Yes No

How were you referred to us?:

Domu.com Yelp Craigslist Rent.com Padmapper

Personal Referral, by: _____ Other _____

I hereby certify that the answers I have given in this application are true and correct to the best of my knowledge. You have my authorization to check my credit, criminal record, rental, and employment history. I understand that any false answers or statements made by me will be sufficient grounds for eviction and/or denial of this application.

I have attached a copy of my photo I.D.

I have attached a check for the 1st month's rent made to the order of _____

Applicant's Signature

Date

OFFICE USE ONLY:

Name(s) on lease: _____

Building: _____ Unit: _____ Monthly Rent: _____ Prorated Rent: _____

Admin Fee: _____ Key Fee: _____

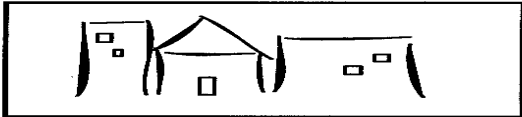
Lease Start Date: _____ Lease End Date: _____ Move-In Date: _____

Sublet _____ Short Term _____ Furnished _____ Pets: _____

Parking Rent/mo: _____ Location/space#: _____

A/C Notes Included Rented Own Fee Amt. _____

Notes:



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Ardmore Winthrop Properties
5734 N. Winthrop Ave – Chicago, IL 60660
(p) 773-271-4132 * (f) 773-989-9190
office@ardmorewinthrop.com

Landlord Verification Form

I hereby certify that the answers I have given in this application are true and correct to the best of my knowledge. You have my authorization to check my credit, criminal record, rental, and employment history. I understand that any false answers or statements made by me will be sufficient grounds for eviction and/or denial of this application.

Applicant's Signature

Date

OFFICE USE ONLY BELOW THIS LINE

To: _____ **@ Fax:** _____

We are requesting the following information about your current or previous tenant:

Name: _____ **Address:** _____

Lease Start & End Dates: _____

Monthly Rent: \$ _____

Number of persons on lease: _____

Has there been a Cosigner on the lease at any time? No Yes

Rental Payment History: Excellent Good Fair Poor

Number of late payments: _____

Any 5 day Notices issued? No Yes *If yes, how many?* _____

Any problems with this tenant? No Yes

If yes, please explain:

Would you lease to this tenant in the future? No Yes

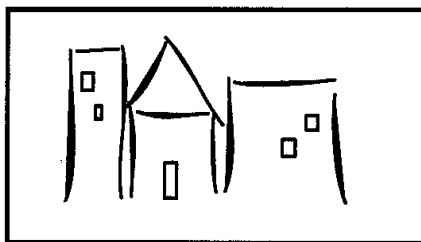
If no, please explain:

Additional comments or information:

Prepared by: Name _____ Title _____ Date: _____

Please fax your response to 773-989-9190, and call the number above with any questions.

Thank you,
Ardmore Winthrop Properties



Bed Bug Rider:

“Don’t Let the Bed Bugs Bite”

If you read the paper or watch the news, chances are by now you have heard about Bed Bugs, or you may know someone who has had experience with Bed Bugs. It has become a bit of a concern for building managers in Chicago, and we are taking some steps to prevent them from becoming a problem in our buildings.

- **Are you familiar with Bed Bugs?** Yes No

Comments:

- **Have you ever lived in a building that had Bed Bugs?** Yes No Unsure

Comments:

It is easy to understand why we should not pick up furniture from alleys, but another known source of the bugs are purchases made on Craigslist and from other resale outlets.

- **Do you agree to investigate to the best of your ability whether any purchases from such sources, made during this lease, have or had Bed Bugs?** Yes No

Remember, being overly cautious in these transactions will reduce chances of your exposure and the building’s exposure to Bed Bugs.

I hereby certify that the answers I have given are true and correct to the best of my knowledge. You have my authorization to inspect my belongings before I move into the building. I understand that any answers or statements made by me could be sufficient grounds to deny the application and/or terminate the lease.

Applicant’s Signature

Date