



RENTAL DEPOSIT APPLICATION

Type of payment for deposit Credit card (last 4 digits): _____ Check (check #): _____ Cash: _____

Circle which applies: Residential/Commercial: \$100.00 Industrial: \$200.00
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NAME OF TENANT(S) ON LEASE: _____

ADDRESS: _____

PHONE #: () - _____

EMAIL ADDRESS: _____

DRIVER'S LICENSE OR STATE ID #: _____

DATE ISSUED: _____ DATE EXPIRED: _____

DATE LEASE BEGINS: _____ LENGTH OF LEASE: _____

LANDLORD/PROPERTY OWNER INFORMATION

OWNER'S NAME: _____

MAILING ADDRESS: _____

PHONE #: () - _____

FOR OFFICE USE ONLY: ACCOUNT #: _____ ENTERED BY: _____
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