



Rental Application

Please complete this form entirely in ink, noting "N/A" or "none" where applicable. Do not use white out. The information you provide will be verified prior to approval to rent a unit to you in a community professionally managed by Lyon Management Group, Inc. d/b/a Lyon Communities.

APPLICANTS – EACH INDIVIDUAL OVER 18 MUST COMPLETE A SEPARATE APPLICATION

FULL NAME OF APPLICANT (LAST, FIRST, M.I.)	GOVERNMENT ISSUED PHOTO ID / TYPE / #	SOCIAL SECURITY #	DATE OF BIRTH
HOME PHONE	OTHER CONTACT PHONE	E-MAIL ADDRESS	

ADDITIONAL PROPOSED OCCUPANTS:

FULL NAME (LAST, FIRST, M.I.)	DATE OF BIRTH
FULL NAME (LAST, FIRST, M.I.)	DATE OF BIRTH
FULL NAME (LAST, FIRST, M.I.)	DATE OF BIRTH
FULL NAME (LAST, FIRST, M.I.)	DATE OF BIRTH

RESIDENCE HISTORY: Rent Paid on Time? Any Insufficient Funds?	Verified by: Contact:	Date: Title:
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Current Residence:

RENT <input type="checkbox"/> OWN <input type="checkbox"/>	STREET ADDRESS	CITY	STATE	ZIP CODE
Landlord/Mortgage Company	NAME	PHONE NUMBER		
	STREET ADDRESS	CITY	STATE	ZIP CODE

RESIDENCE HISTORY: Rent Paid on Time? Any Insufficient Funds?	Verified by: Contact:	Date: Title:
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Previous Residence:

RENT <input type="checkbox"/> OWN <input type="checkbox"/>	STREET ADDRESS	CITY	STATE	ZIP CODE
Landlord/Mortgage Company	NAME	PHONE NUMBER		
	STREET ADDRESS	CITY	STATE	ZIP CODE

INCOME INFORMATION	Verified by: Contact:	Date: Title:
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If self employed, list name of business, business address including zip code and phone number.

Employment Information (if employed)

NAME	TYPE OF BUSINESS	PHONE NUMBER
STREET ADDRESS	CITY	STATE ZIP CODE
JOB TITLE	SUPERVISOR	DATE OF HIRE
\$ GROSS MO. INCOME	\$ OTHER INCOME	SOURCE

INCOME INFORMATION	Verified by: Contact:	Date: Title:
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Other Income Information

TYPE OF INCOME	\$ GROSS MO. AMOUNT
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INCOME INFORMATION	Verified by: Contact:	Date: Title:
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Other Income Information

TYPE OF INCOME	\$ GROSS MO. AMOUNT
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