

INDIAN OAKS APARTMENTS

1111 S. Oakwood Road, Enid, Oklahoma 73703 Phone: 580-233-7070 Fax: 580-233-0885

RENTAL APPLICATION

Personal Information

Name: _____ SS #: _____ D/L #: _____
Phone: _____ Date of Birth: _____
Current Address: _____ City: _____ State: _____ Zip: _____
Landlord: _____ Landlord Phone: _____
Previous Address:
(if above address is 12 months or less) _____ City: _____ State: _____ Zip: _____
Personal Reference: _____ Phone: _____
Personal Reference: _____ Phone: _____
Emergency Contact: _____ Phone: _____
Roommate/Spouse: _____ SS #: _____ D/L #: _____
Phone: _____ Date of Birth: _____
Current Address: _____ City: _____ State: _____ Zip: _____
Landlord: _____ Landlord Phone: _____
Previous Address:
(if above address is 12 months or less) _____ City: _____ State: _____ Zip: _____

Employment Information

Employer: _____ Address: _____
Phone: _____ Hire Date: _____ Salary (month): _____
Previous Employer (if less than 12 months): _____
Phone: _____ Hire Date: _____ Salary (month): _____
Roommate/Spouse
Employer: _____ Address: _____
Phone: _____ Hire Date: _____ Salary (month): _____
Previous Employer (if less than 12 months): _____
Phone: _____ Hire Date: _____ Salary (month): _____

Other Information

Other persons to occupy apartment:

Name: _____ Relationship: _____
Name: _____ Relationship: _____

Automobiles:

Make & Year: _____ License: _____ State: _____
Make & Year: _____ License: _____ State: _____

Pets: None Dog Cat Other (specify): _____ Weight & Breed: _____

Do you smoke? Yes No

It is understood that the above information is confidential. The undersigned applicant(s) hereby certify that the above information is true and accurate and authorize verification of same and authorize a credit check. **Please include \$25.00 application fee.**

Applicant Signature: _____ Date: _____

Roommate/Spouse: _____ Date: _____