



APPLICATION TO RENT

REFERENCE AND INFORMATION SHEET - CONFIDENTIAL

PLEASE PRINT

Date _____

Date premises required _____

Preferred location/suite _____

Applicant's Full Name _____

Home Phone _____ Work Phone _____ Cell Phone _____

E-mail _____ Driver's License Number _____ Age _____

Applicant's present residence _____

How long _____ Present monthly rent _____ Reason for leaving _____

Present landlord _____ Phone Number _____

Employed by _____ Occupation _____

Name of Supervisor _____ Supervisor Phone _____

Number of years employed with current employer _____ Salary/annual income \$ _____

Names of people to occupy suite _____

Do you intend to keep any pets? _____ If yes, what type and how many _____

Personal Reference _____ Relationship _____

Phone (work and home) _____ Cell Phone _____

Next of Kin/ Emergency Contact(s) _____ Relationship _____

Phone (work and home) _____ Cell Phone _____

Applicant's permanent mailing address _____

How did you hear about Viridian Management? _____

PLEASE USE ANOTHER FORM FOR EACH ADDITIONAL APPLICANT



APPLICANTS CONSENT CONFIDENTIAL

The applicant declares all above statements to be true and authorizes Viridian Management to contact the references named in this application.

The applicant hereby provides consent for collection, use, and disclosure of the personal information provided in accordance with the Privacy Policy of Viridian Management.

Viridian Management does not disclose any information about its' residents or clients to other sources, unless consent is given or it is otherwise required or authorized by law.

I understand that I may decline or object to having my personal information collected, used, or disclosed for the above purposes. I also understand that I may revoke this consent at any time by submitting a written notice. By declining, objecting to, or revoking consent to the collection, use, and disclosure of my personal information I may be forfeiting my eligibility for residency with Viridian Management.

Date _____

Applicants Signature _____

Applicants printed name _____

Please fax completed application to Viridian Management, toll free at

1 (888) 739 2962