


*On-line application available at www.potterhousebuilders.com (no printing required)

*Fax this completed form to 859-384-2006

 potterhousegroup <small>CONTRACTORS - BUILDING SERVICES - REAL ESTATE</small>				<h2 style="margin: 0;">APPLICATION FORM</h2>	
Name (1):					
Date of Birth:		SSN:		Phone:	
Current Address:					
City:		State:		ZIP:	
Own Rent (Please circle)		Monthly payment or rent:		How long?	
Landlord Name:				Landlord Phone:	
Previous Address:					
City:		State:		ZIP:	
Owned Rented (Please circle)		Monthly payment or rent:		How long?	
Current Employer:					
Employer Address:				How long?	
Phone:		E-mail:		Fax:	
City:		State:		ZIP:	
Position:		Hourly Salary (Please circle)		Annual income:	
Name of a relative not residing with you:					
Address:					
City:		State:		ZIP: Phone:	
Relationship:					
Name (2):					
Date of Birth:		SSN:		Phone:	
Current Address:					
City:		State:		ZIP:	
Own Rent (Please circle)		Monthly payment or rent:		How long?	
Previous Address:					
City:		State:		ZIP:	
Owned/Rented (Please circle)		Monthly payment or rent:		How long?	
Current Employer:					
Employer Address:				How long?	
Phone:		E-mail:		Fax:	
City:		State:		ZIP:	
Position:		Hourly Salary (Please circle)		Annual income:	
PERSONAL REFERENCES		Address:		Phone:	
Name:					

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EMERGENCY – List 2 starting with relatives		
Name _____	relationship _____	phone _____

Name _____	relationship _____	phone _____

Answer the following questions: Do you have pets? Yes No Do you or anyone living in the property smoke? Yes No		
Have you or any of the person(s) that will be living in the house ever been convicted or charged as a sex offender. YES / NO		
I authorize the verification of the information provided on this form as to my credit and employment. I have received a copy of this application.		
Signature of Applicant:		Date:
Signature of Spouse:		Date:

Information needed to complete application:

- need copy of drivers license
- verification of income (last 2 paycheck stubs)
- sign Authorization to Release Information Form (attached)

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Authorization to Release Information

From: _____ (tenant name)
To: _____

I have applied for a dwelling unit with PHB Properties LLC.

I have been requested to provide information for their use in reviewing my credit, background and qualifications. Therefore, I hereby authorize the investigation of my past and present work, character, education, military and employment qualifications. The release in any manner of all information by you is hereby authorized whether such information is of record or not, and I do hereby release all persons, agencies, firms, companies, etc., from any damages resulting from providing such information.

This authorization is valid for **45** days from date below.
Please keep this copy of my release request for your files. Thank you.

Signature

Date

Signature

Date

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