

Ohio State Properties – Rental Application

PO BOX 82150 Columbus, OH 43202

www.ohiostateproperties.com

614-218-7098 (cell)

866-371-1655 (FAX)

email:john@ohiostateproperties.com

Date: _____ Unit Address: _____

Full Name: _____ E-mail: _____
(First) (Middle) (Last)

Current Address: _____
(Street) (City, State, Zip)

Mobile Number: _____ Home Number: _____

Permanent Address: _____
(Street) (City, State, Zip)

Permanent Phone Number: _____ Social Security Number: _____

Date of Birth: _____ Driver's License Number & State: _____

License Plate number _____ Make of vehicle _____ Color _____

Employer: _____
(Name) (Phone Number) (Position) (Wage)

Present Landlord: _____
(Name) (Phone Number)

Parental/Co-Signer Information

Parent/Co-signer Name _____
(Fathers Name) (Phone Number) (Email Address) (Occupation)

Parent/Co-signer Name _____
(Mothers Name) (Phone Number) (Email Address) (Occupation)

Parent/Co-signer Address _____
(Street) (City, State, Zip)

Have you ever been sued, evicted, or asked to leave an apartment? ____ How will your rent be paid? _____

Parent/Cosigner: _____
(Place of Employment) (Work Number)

*Please enclose a \$20 Non-Refundable Application Fee per Applicant, a photocopy of two forms of ID, and deposit money. I hereby state that the above information is correct and any false information will cause me to not be accepted. I hereby authorize you to check my credit and references.

(Printed Name of Applicant)

(Signature)

(Date)