



# Avalon Apartments, Aspen Gate, Aspen West Rental Application

(303) 471-5884 \* Fax (303) 374-6037 \* Email office@duapartments.com

Mailing Address: Joanne Conca, PMB 437, 9249 S. Broadway Unit #200, Highlands Ranch, CO 80129

Complete a separate application if co-applicant is other than parent or spouse

Applicant's Name (Full Legal Name) \_\_\_\_\_ Social Security # \_\_\_\_\_  
First Middle Last

DOB \_\_\_\_\_ Dr. Lic. #/St. \_\_\_\_\_ Phone# \_\_\_\_\_ Email \_\_\_\_\_

Co-Applicant's Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
First Middle Last

DOB \_\_\_\_\_ Dr. Lic. #/St. \_\_\_\_\_ Phone# \_\_\_\_\_ Email \_\_\_\_\_

Other Occupants Name, Age & Relationship \_\_\_\_\_

Are you a DU student? Yes No

### CURRENT ADDRESS

Street: \_\_\_\_\_ Unit: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_

Dates of Residence: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Amount of Rent: \_\_\_\_\_

Apt Community: \_\_\_\_\_ Landlord: \_\_\_\_\_ Day#: \_\_\_\_\_ Night#: \_\_\_\_\_

### PRIOR ADDRESS

Street: \_\_\_\_\_ Unit: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip Code: \_\_\_\_\_

Dates of Residence: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_ Amount of Rent: \_\_\_\_\_

Apt Community: \_\_\_\_\_ Landlord: \_\_\_\_\_ Day#: \_\_\_\_\_ Night#: \_\_\_\_\_

### CURRENT/PRIOR OCCUPATION

CURRENT/PRIOR OCCUPATION		CURRENT/PRIOR OCCUPATION - Co-Applicant	
Employer:	Position:	Employer:	Position:
Main Phone#:	City:	Main Phone#:	City:
Manager:	State:	Manager:	State:
Date Hired:	Monthly Income:	Date Hired:	Monthly Income:

Additional Income to Pay Rent (Parents, Loans, etc.): \_\_\_\_\_ (Monthly Amount) Source \_\_\_\_\_

### AUTOMOBILE & FINANCIAL

Make: \_\_\_\_\_ Model: \_\_\_\_\_ Color: \_\_\_\_\_ Year: \_\_\_\_\_ Lic. Plate#: \_\_\_\_\_

Auto Loan - Bank: \_\_\_\_\_ City,State: \_\_\_\_\_ Account#: \_\_\_\_\_ Monthly Payment: \_\_\_\_\_

Checking Account - Bank: \_\_\_\_\_ City,State: \_\_\_\_\_ Account#: \_\_\_\_\_ Phone#: \_\_\_\_\_

Savings Account - Bank: \_\_\_\_\_ City,State: \_\_\_\_\_ Account#: \_\_\_\_\_ Phone#: \_\_\_\_\_

Have you ever used any other names? If Yes, name(s) \_\_\_\_\_

### EMERGENCY CONTACT

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Address: \_\_\_\_\_ Phone#: \_\_\_\_\_

### Please Answer the following questions:

- (1) Do you require any special accommodations? Yes No If Yes, what type? \_\_\_\_\_
- (2) Do you own an animal? Yes No If Yes, what type? \_\_\_\_\_ Is it a guide or service dog? Yes No
- (3) Do you or any other occupant smoke? Yes No If No, have you smoked in the last 6 months? Yes No
- (4) Have you or any other person named on this application: Been evicted? Yes No Filed bankruptcy? Yes No  
if evicted, where and when? \_\_\_\_\_
- (5) Do you owe any unpaid rent? Yes No If Yes, how much? \_\_\_\_\_
- (6) Have you ever violated a lease, rental agreement, or regulations at a former place of rent? Yes No
- (7) Have you ever been charged with a misuse or abuse to any rental property? Yes No
- (8) Have you or any other occupant named on this application ever been convicted of a crime or felony? Yes No  
If Yes, explain charge (include date of conviction and state/county): \_\_\_\_\_

### RELEASE & DEPOSIT

This is to inform you that as part of our processing your application, a consumer investigation involving statements made on this application is being initiated. This investigation may involve personal interviews with your landlord, employer, others, a credit check, background check, eviction history, and criminal report, all of which the applicant(s) authorizes. The applicant(s) understands that approval of this application is conditional upon the information supplied in the above mentioned consumer investigation meeting lease criteria. Owner and/or agent of the owner may refuse possession of the above mentioned accommodations because of any derogatory information contained in the consumer investigation. The applicant(s) have read the foregoing and certify that the information herein is TRUE and CORRECT. The applicant(s) understand that false, misleading, or incomplete information can be grounds for denial of tenancy or for eviction. If the applicant(s) is accepted as a tenant and enters into a lease agreement, then this document shall become part of the lease. If the owner determines that any information contained herein is FALSE or MISLEADING, then, at the owner's option, the lease shall be voidable upon 3 days notice. If there is an application fee, it is nonrefundable.

Applicant(s) hereby deposits the amount of \_\_\_\_\_. If the applicant(s) is accepted and enters into a lease agreement, then the deposit shall be applied to the security deposit. The deposit will be refunded if the applicant(s) is not accepted as a tenant.

SIGNED \_\_\_\_\_ SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

If you are submitting this application by email, type your name(s) above and this will be your legal electronic signature(s).

OFFICE USE ONLY RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_