



NeighborWorks® Pocatello
 206 N. ARTHUR AVE.
 POCATELLO, ID 83204
 PHONE: 208-232-9468 FAX 208-232-9231



RENTAL APPLICATION

Applicant:	Co-Applicant or Roommate:
Name: _____	Name: _____
Social Security No.:	Social Security No.:
Drivers License No.:	Drivers License No.:
Date of Birth:	Date of Birth:
Children's Names & Ages:	Children's Names & Ages:
Total No. in Household:	Total No. in Household:
Do you have a pet?	Do you have a pet?
Any plans on obtaining one?	Any plans on obtaining one?
Kind?	Kind?
Do you smoke?	Do you smoke?
Present Address:	Present Address:
City, State, & Zip:	City, State, & Zip:
Phone:	Phone:
How long?	How long?
Managers Name?	Managers Name?
Phone:	Phone:

Previous Address:	Previous Address:
City, State, & Zip:	City, State, & Zip:
How long?	How long?
Managers Name?	Managers Name?
Phone:	Phone:

EMPLOYMENT	
Employer's Name:	Employer's Name:
Employer's Address:	Employer's Address:
Employer's phone:	Employer's phone:
How long employed?	How long employed?
Gross hourly or monthly income?	Gross hourly or monthly salary?
If hourly, hours per week?	If hourly, hours per week?



Monthly Obligations:	Monthly Obligations:
Name:	Name:
Balance:	Balance:
Payment:	Payment:
Name:	Name:
Balance:	Balance:
Payment:	Payment:

Educational Information		Educational Information	
Do You Have A School Grant? Y N		Do You Have A School Grant? Y N	
Amount:	For (Period)	Amount:	For (Period)
Tuition Amount		Tuition Amount	
For (Period)		For (Period)	

Automobile:	Automobile:
Make: Year: Color:	Make Year Color
License Plate No.:	License Plate No.:

IN CASE OF EMERGENCY, NOTIFY:	IN CASE OF EMERGENCY, NOTIFY:
Name:	Name:
Address:	Address:
Phone:	Phone:
Relationship:	Relationship:

I certify that the above information is true and correct to the best of my knowledge.

Applicant **Date**

Co-Applicant **Date**



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AUTHORIZATION FORM

I hereby authorize NeighborWorks Pocatello, Inc. to order a credit report, and verify other information, including a background check, and past and present landlord references. I also understand that a photocopy or fax of this form will serve as authorization.

The information NeighborWorks Pocatello obtains is only to be used in the processing of my application for an apartment or commercial rental and/or pre-qualifying me for an extended lease.

_____	_____	_____
Applicant	SS#	Date

_____	_____	_____
Current Address		Date of birth

_____	_____	_____
Co-Applicant	SS#	Date

_____	_____	_____
Current Address		Date of birth