

Please Print Clearly

# APPLICATION FOR LEASE

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## LEGEND PARK APARTMENTS

305 CAMBIA DRIVE  
SCHAUMBURG, IL 60193  
Phone: 847-891-3090  
Fax: 847-352-2480

Building: \_\_\_\_\_ Apartment # \_\_\_\_\_

Lease from: \_\_\_\_\_ to \_\_\_\_\_

Move in Date: \_\_\_\_\_

Rent \$ \_\_\_\_\_ Administration Fee \$ \_\_\_\_\_

Pet Fee \$ \_\_\_\_\_ Bedrooms 0 1 2 (circle one)

**There is only one dog or two cats allowed per apartment.**

## APPLICANT

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Home # \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_ Drivers License # \_\_\_\_\_

Email address \_\_\_\_\_ Best tel # to reach you \_\_\_\_\_ Circle: cell or work or home? \_\_\_\_\_

Spouse's Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Birth Date \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

## RESIDENCE HISTORY

Address \_\_\_\_\_ City, State Zip \_\_\_\_\_ Rent/Own \_\_\_\_\_ Yrs. \_\_\_\_\_ Monthly Pmt \_\_\_\_\_

Landlord \_\_\_\_\_ Person to Contact \_\_\_\_\_ Phone \_\_\_\_\_

Previous Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Rent/Own \_\_\_\_\_ Yrs. \_\_\_\_\_ Monthly Pmt. \_\_\_\_\_

Previous Landlord \_\_\_\_\_ Phone \_\_\_\_\_

## EMPLOYMENT HISTORY

Employer \_\_\_\_\_ Person to contact \_\_\_\_\_ Their title \_\_\_\_\_ Phone # \_\_\_\_\_

Employer Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Your Position \_\_\_\_\_ How Long? \_\_\_\_\_ Salary \_\_\_\_\_

Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_ Yrs.? \_\_\_\_\_ Salary \_\_\_\_\_

Spouse Employment \_\_\_\_\_ Person to Contact \_\_\_\_\_ Their Title \_\_\_\_\_

Your Position \_\_\_\_\_ How Long? \_\_\_\_\_ Salary \_\_\_\_\_

Employer Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone # \_\_\_\_\_

Previous Employer \_\_\_\_\_ Phone \_\_\_\_\_ How Long? \_\_\_\_\_ Salary \_\_\_\_\_

Additional Income \_\_\_\_\_ Explain \_\_\_\_\_

How many people to occupy Apartment? \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Do you have any pets? \_\_\_\_\_ Describe \_\_\_\_\_

**Please remember there is only one dog or two cats allowed per apartment. Pet Fee Dog \$300 Cat \$200**

Have you ever been convicted of or pleaded guilty or "no contest" to a felony (whether or not resulting in a conviction)? \_\_\_\_\_

If yes, explain \_\_\_\_\_

Have you ever been convicted of or pleaded guilty or "no contest" to a misdemeanor (whether or not resulting in a conviction)? \_\_\_\_\_

If yes, explain \_\_\_\_\_

In Emergency Notify \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Full Address \_\_\_\_\_

**I represent to you that I have read this entire application and that all of the above information hereon is true and correct. I further represent that my rental and credit records are in good standing with no judgements or liens against me. If any of the above information is false, I hereby agree that my entire administration fee may be forfeited to you. I also agree that if I fail to complete this transaction, after 72 hours of the application date, my entire administration fee will be forfeited to you. I understand that this application is subject to your approval, and if my application is not accepted, my administration fee will be returned in full. I agree to be bound by the rules and regulations of the building. I understand that my \$40 credit check fee is non-refundable. I also understand that this is not a lease and should my application be accepted, I agree to sign your lease form currently in use. If for any reason whatsoever, we are unable to make the apartment, which is the subject of this application, available at the beginning of the lease term, I hereby waive any and all rights actual, punitive or consequential damages.**

**IT IS POLICY NOT TO DISCRIMINATE RENTALS ON THE BASIS OF RACE, COLOR, NATIONAL ORIGIN, RELIGION, ANCESTRY, AGE, SEX, FAMILIAL STATUS, MARITAL STATUS, PHYSICAL OR MENTAL HANDICAP, MILITARY HISTORY OR SEXUAL ORIENTATION.**

**I hereby authorize my employer/landlord to release any information to The Legend Group for the purpose of processing my lease application in addition to the credit and criminal checks that will be run.**

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Applicant

DATE: \_\_\_\_\_