	Rental Application	ion			
Eagle Development Inc. PO Box 497, North Liberty, IA	52317	Date	Date		
(319) 321-1217 Will (319) 621-3565 Scott	(319) 351-7579 fax	eagledevinc@gmail.com www.northlibertyrentals.com			
Application Fee is \$20 per adu Please make check to Eagle D	arate application. Please Print Nea Ilt and is non-refundable. Development and submit with your on your income and your credit,	ir application.			
Address of desired apartment	:				
Desired Move-In Date					
Name of Applicant					
Last		First Middle			
Maiden or other Former Name					
Social Security #		Birth Date			
Driver's License #		State			
Phone #					
Email					
Current Address					
City & State		Zin			
Dates of Occupancy		Mansheli Day was a wet			
Landlord Name					
Landlord Phone # and Email					
Reason for Moving		May we Contact?			
Previous Address					
City & State		Zip			
		Monthly Payment			
Landlord Name					
Landlord Phone # and Email					
Current or Future Employer's	Name				
Employer's Address					
City & State					
		Phone #			
		End Date			
Gross Monthly Income \$	You	ur Position			
Current or Past Employer's Na	ame				
		Phone #			
		End Date			
Gross Monthly Income \$	You	ur Position			

Source and amount of any other Income you wish us to consider:

Emergency Contact Name	Relationsh	ip			
Address			_		
City & State			Z	ip	
Phone:		Email:			
Vehicle Make & Model			Col	or	
Name of Bank			Phone#		
Address					
Circle The Accounts You Have		Savings	Checking	Loan	
Do you have pets?	NO YES	List number, ty	be, breed, and weig	ght for each p	et
Do you plan on getting a pe		NO YES	DOG CAT		
			DOG OAT		
It is important to answer al	• •	-		answer	
"yes" to any question, plea	se attach a written explana	ation and provide	the details.		
HAVE YOU EVER:			Circle Ye		
1) Been convicted for any ille				YES	NO
2) Been convicted for any fel	-			YES YES	NO
3) Been convicted for any assault, abuse, or sexual misconduct?					NO
4) Been served an eviction notice or been asked to vacate a property you were renting?					NO
5) Been sued for non-payment of a loan, credit card, or other debt?					NO
6) Been Forclosed on or File	d for Bankruptcy?			YES	NO
7) Do you smoke?				YES	NO
All of our apartments are n	on-smoking. This includes	tobacco and any	thing else.		
If approved, are you ready to	o immediately sign a lease ar	nd pay the security	deposit?	YES	NO
How long do you anticipate li	iving in these apartments?	1 Year	2 Years	3+ Y	ears
Who else will be living with y	<b>-</b> .				
Please circle which floor(s) y		Ground	Middle	Тс	р

Each applicant must provide a photo ID and fully complete this application. The undersigned certifies that the above information is true and correct. It is understood that all information will be verified and that Eagle Development Inc. will rent to the best qualified applicant NOT necessarily the first applicant. A co-signer may be required.

I hereby authorize the release of any information regarding my employment, residence, credit, or criminal history.

Print Applicant's Name

Signature \_\_\_\_\_ Date\_\_\_\_\_