

LS ASSOCIATES

Lakeshore Towers Condominiums & Executive Suites

3105 Lakeshore Dr., Ste. B104

Anchorage, AK 99517

TEL; (907) 266-4500

FAX: (907) 266-4549

LS Associates does business in accordance with the Federal Fair Housing Law (Fair Housing Amendments Act of 1988). We do not discriminate against any applicant on the basis of race, color, religion, sex, handicap, familial status, national origin, or any other legally protected status.

Please fill out all applicable fields on the front and back of this form. Thank you for your interest Lakeshore Towers.

PLEASE TELL US ABOUT YOURSELF

Applicant's Full Name	Date of Birth	Driver's Licence #/State	SSN
Co-Applicant's Name	Date of Birth	Driver's Licence #/State	SSN
Other occupants and their relationship			
Residence desired: All apartments are fully-furnished		Date of occupancy needed:	
<input type="radio"/> Studio <input type="radio"/> One-Bedroom <input type="radio"/> Two-Bedroom		Terms: <input type="radio"/> Monthly <input type="radio"/> 3 month <input type="radio"/> 6 month Other	

RESIDENCE HISTORY (APPLICANT)

Current Residence Address		City / State	ZIP
Phone	Check One	How Long?	Monthly Payment
	<input type="radio"/> Own <input type="radio"/> Rent		
Reason for leaving			
Name/ Address of Current Landlord, Apt. Community, or Mortgage Co.			Phone
Previous Address (if within 3 years)		City/State	ZIP
Name/ Address of Previous Landlord, Apt. Community, or Mortgage Co.			Phone
Reason for leaving			

EMPLOYMENT

Applicant's Employment Status	<input type="radio"/> Full-Time <input type="radio"/> Part-Time <input type="radio"/> Self-Employed <input type="radio"/> Student <input type="radio"/> Retired <input type="radio"/> N/A		
Applicant's Employer			Position
Address		City / State	Phone

How long?	Salary / Mo.	Supervisor	
Co-Applicant's Employment Status:	<input type="radio"/> Full-Time <input type="radio"/> Part-Time <input type="radio"/> Self-Employed <input type="radio"/> Student <input type="radio"/> Retired <input type="radio"/> N / A		
Co-Applicant's Employer		Position	
Address		City / State	Phone
How long?	Salary / Mo.	Supervisor	
<i>Additional income(optional, below): If there are other source of income you would like us to consider, please list who we could contact for information. You do NOT have to reveal alimony, child support, or spouse's annual income unless you want us to consider it in the application.</i>			
(Applicant / Co-Applicant) Source		Phone	Amount/mo.

BANK AND CREDIT REFERENCES (APPLICANT)

Bank/Financial Institution	Branch/City/State	Account #/ Type	Phone
Bank/Financial Institution	Branch/City/State	Account #/ Type	Phone
Personal Reference		Relationship	Phone

VEHICLES

Please list any vehicles (including rental vehicles) that are to be parked at Lakeshore Towers.

Make / Model	Year	Color	License #/ State

Do you smoke? Yes No

Do you have a legal right to be in the United States?

- Yes, because I am a/We are United States citizen(s)
- Yes, because I/we have valid documentation from the Bureau of Citizenship and Immigration Services (BCIS, formerly the US Immigration and Naturalization Service) or from the State Department.
- No

Have you ever:

- been sued for non-payment of rent? Yes No
- been evicted or ask to move out? Yes No
- been sued for damage to rental property? Yes No
- broken a rental agreement or lease? Yes No
- declared bankruptcy within 7 years? Yes No

If Yes to any, please explain:

Please give any additional information that might help us evaluate your application:

How did you hear about Lakeshore Tower?

In case of personal emergency, notify:

Relationship

Address:

City / State:

Phone:

I/We hereby make application for an apartment and certify that the information included in this Rental Application is correct. I/We understand that My/Our application status remains pending until I/We submit (for examination) government-issued photo identification. I/We authorize LS Associates to contact any current or previous landlords, employers, credit references, and personal references that I/We have listed. I/We also authorize LS Associates to obtain my/our consumer credit report(s) from a credit reporting agency, which will appear as an inquiry on my/our credit report(s).

Applicant's Signature

Date

Co-Applicant's Signature

Date