



2734 North 48th St. • Lincoln, NE 68504

Phone: 402-466-1686 Fax: 402-466-1751 www.rdhinkley.com

RENTAL LEASE APPLICATION

Rental address applying for:		Desired move-in date:				
Legal Name:		Phone Number:				
Social Security Number:		License Number/State Issued:				
Date of Birth:		Email Address:				
Residence Histo	ry – List past 3 reside	ences (Beginning with	most recent) Receive	ing a bad reference is a denial)		
1. Current Address:		ZipCode:				
Move in date:		Move out date:	Rental	Amount:		
Reason for le	aving:					
Landlord name:		Phone number:				
2. Previous Address:				ZipCode:		
Move in date:		Move out date: Rental Amount:		Amount:		
Reason for le	aving:					
Landlord name:		Phone number:				
3. Previous Address:		ZipCode:				
Move in date:		Move out date: Rental Amount:		Amount:		
Reason for le	aving:					
Landlord nan	ne:	Phone number:				
Have you ever b	een evicted? Yes	No	Owing another la	ndlord money is a denial		
Address evicted f	From:			Date evicted:		
Landlord name:		Phone Number:				
Current Autos:						
Make:	Model:	Year:	Color:	Plate Number:		
Make:	Model:	Year:	Color:	Plate Number:		

Emergency Contact:		Rela	Relationship:		_ Phone Number:	
Incom	ne/Current Employ	ver: Income is required to be	e at 35% or lower to qu	ıalify (Rent/inc	come)	
Compa	any and supervisor:			Date o	of hire:	
Hourly	/ rate:	Hours per week:	Phone numbe	r:		
Other	Income:					
Other	Income:					
Other	Occupants: Any p	persons 18 years of age or ole	der are required to fill	out a separate	rental application.	
1.	Name:		Relationship:			
	Date of Birth:		Social Security Nu	mber:		
2.	Name:		Relationship:			
	Date of Birth:		Social Security Nu	mber:		
3.	Name:		Relationship:			
	Date of Birth:		Social Security Nu	mber:		
		sistance animals?: Yes: accept pets you will be denie				
1.	Type:	Breed:	Aş	ge:	Weight:	
2.	Type:	Breed:	Aş	ge:	Weight:	
3.	Type:	Breed:	Aş	ge:	Weight:	
Applica	ation Fee (Non refund	dable): Cash: Che	ck:Mone	ey Order:		
be cand R.D. H functio underst accepte	celled by the Landlord inkley & Associates on of this agency is to tands and agrees that ed, applicant is legally	that the information is complete and if any of the information provide to verify the above information the track and maintain record such a by signing this application it authorized to the rental unit. If I sit will be retained as termination	ded in the application is mathrough a consumer reportion is your resident conduct an anorizes management to rend I should cancel this application.	nterially inaccurating agency and to differential differential united the diff	e or incomplete. I authorize contact references. The history. The applicant nit from the market. If	
-R.D. I -Applie	Hinkley & Associates cation is good for 30	does not accept satellite dishes of will not accept any application p days after submitted for any of or epted without identification and a	orior to the applicant viewi ur available properties.			
I give p	permission to use my No:	information to run a RENTERS	INSURANCE quote for th	e property I have	requested to rent/rented.	
Applica	ant Signature			Date		