

LEGACY STUDENT HOUSING
Rental Application

For Rental Property _____ Date _____

Applicant's Name _____

Phone: Cell _____ Home _____

Email Address: _____

Are you a student at FSU? Yes ___ No ___ If Yes, Month and Year of Graduation _____

Social Security Number: _____ Date of Birth _____

Current Address _____ Date of Occupancy _____

Landlord's Name & Phone _____

I am leaving my present address because _____

Parents' or Financially Responsible Party's Name: (If not parent, Relationship to Applicant)

Address _____

City _____ State _____ Zip _____

Phone: Cell _____ Home _____

Parents' or Financially Responsible Party's Employer and Business Phone Numbers:

Mother or Responsible Party _____

Father or Responsible Party _____

Will any part of your rent be paid by financial aid/grant? Yes ___ No ___

Source of Aid _____

Driver's License No., State of Issuance & Expiration Date _____

Tag No. & State of Issuance _____ Car Make, Model & Year _____

Have you ever been evicted from a tenancy or had a judgment issued against you? _____

Have you ever willfully and intentionally refused or failed to pay rent when due? If so, please briefly explain the circumstances _____

I DECLARE THAT THE FOREGOING INFORMATION IS TRUE & CORRECT, AND THAT LEGACY MANAGEMENT GROUP MAY TERMINATE ANY RENTAL HOUSING AGREEMENT ENTERED INTO ON THE RELIANCE OF ANY MISSTATEMENTS MADE ABOVE & AUTHORIZE ITS VERIFICATION IN OBTAINING A CONSUMER REPORT OR INFORMATION FROM FROSTBURG STATE UNIVERSITY

Applicant's Signature _____ Date _____