



Somerset Hills

A P A R T M E N T S

390 W. Crestline Drive

Boise, ID 83702

Phone: (208)344-4242 Fax: (208)336-8608



Occupants: (Need information on all people over the age of 18 who will be residing in the apartment)

Name _____ SS# _____ / ____ / ____ D.O.B. _____ / ____ / ____
 Name _____ SS# _____ / ____ / ____ D.O.B. _____ / ____ / ____
 Current Phone Number _____ Work Number _____ Cell Phone _____
 Positive I.D. Required (D.L. #) _____ Move in Date _____ Unit # _____

RENTAL HISTORY (Information on rentals where your name was on the lease) (Need information for at least 12 months)

Current Address _____ City _____ State _____ Zip _____
 How Long? _____ Owner/Manager _____ Phone _____ Monthly Payment _____
 Reason for Leaving: _____
 Previous Address _____ City _____ State _____ Zip _____
 How Long? _____ Owner/Manager _____ Phone _____ Monthly Payment _____
 Reason for Leaving: _____

EMPLOYMENT HISTORY (Need Information for at least 12 months)

Current Employer _____ Address _____ Phone _____
 How Long? _____ Monthly Salary _____ Supervisor _____
 Previous Employer _____ Address _____ Phone _____
 How Long? _____ Monthly Salary _____ Supervisor _____
 Spouse Employer _____ Address _____ Phone _____
 How Long? _____ Monthly Salary _____ Supervisor _____
 Other Income Source: _____ Amount: _____

REFERENCES (Personal & Professional)

Family: Name _____ Address _____ Phone _____
 Other: Name _____ Address _____ Phone _____
 Automobiles: Make _____ Model _____ Year _____ License # _____
 Automobiles: Make _____ Model _____ Year _____ License # _____
 Pets: Type _____ Breed _____ Age _____ Weight _____ Color _____
 Pets: Type _____ Breed _____ Age _____ Weight _____ Color _____

Have you ever filed a petition of bankruptcy? _____ Have you ever been evicted from any tenancy or had an eviction notice served on you? _____ Have you ever willfully and intentionally refused to pay any rent when due? _____ Have you ever been convicted of a misdemeanor or felony other than a traffic violation? _____ Are you a current illegal abuser or addict of a controlled substance? _____ Have you ever been convicted of the illegal manufacture or distribution of a controlled substance? _____ If yes to any of the above, please indicate date of occurrence and explanation: _____

I declare that the foregoing is true and correct, authorize its verification and the obtaining of a credit report. I further agree that the Landlord may terminate any agreement entered into in reliance on any misrepresentation made above.

Applicant _____ Date _____

Applicant _____ Date _____