

Remington Village Apartments

711 Express Drive
Gillette, WY 82718

Phone: (307) 687-8000 Fax: (307) 682 - 3846

Incomplete applications will not be accepted

Applicant # 1 - General Information					
Last Name			First	Middle	Telephone Number
Social Security Number		Birthdate		Driver License #	State Issued
Email address		Do you have a water bed? Do you have water bed insurance? () Yes () No () Yes () No		Do you have a pet? () Yes () No Type / Weight _____	
Applicant # 1 - Resident History (2 Years)					
Current Address		City		State	Zip Code
From/To		Name of Present Landlord		Present Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$	Name of Present Landlord		Present Landlord Phone Number	
Previous Address		City		State	Zip Code
From/To		Name of Previous Landlord		Previous Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$	Name of Previous Landlord		Previous Landlord Phone Number	
Previous Address		City		State	Zip Code
From/To		Name of Previous Landlord		Previous Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$	Name of Previous Landlord		Previous Landlord Phone Number	
Applicant # 1 - Employment History (2 Years) & Additional Income Information					
Employer			Position Held / Occupation		From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Employer			Position Held / Occupation		From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Employer			Position Held / Occupation		From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Additional Income: (Additional income such as child support, alimony, etc, need not be disclosed unless it is to be included for qualification hereunder) Source:					Monthly Amount \$
Applicant # 1 - Vehicle Information					
Make	Model	Year	Color	License Plate Number	State Issued
Payments Made to:					Monthly Payment \$
Applicant # 1 - Emergency Contact Information & Personal Reference					
Emergency Contact		Relationship		Phone Number	
Emergency Contact Address		City		State	Zip Code
Personal Reference		Relationship		Phone Number	

Applicant # 2 - General Information					
Last Name		First	Middle	Telephone Number	
Social Security Number		Birthdate		Driver License #	State Issued
Are you married to App. 1? () Yes () No	Email address		Do you have a water bed? Do you have water bed insurance? () Yes () No () Yes () No		Do you have a pet? () Yes () No Type / Weight _____
Applicant # 2 - Resident History (2 Years)					
Current Address		City		State	Zip Code
From/To		Name of Present Landlord		Present Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$		City		State
Previous Address		City		State	Zip Code
From/To		Name of Previous Landlord		Previous Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$		City		State
Previous Address		City		State	Zip Code
From/To		Name of Previous Landlord		Previous Landlord Phone Number	
Please Circle: Own Rent	Monthly Payment / Rent \$		City		State
Previous Address		City		State	Zip Code
From/To		Name of Previous Landlord		Previous Landlord Phone Number	
Applicant # 2 - Employment History (2 Years) & Additional Income Information					
Employer		Position Held / Occupation			From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Employer		Position Held / Occupation			From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Employer		Position Held / Occupation			From/To
Employer Address		Supervisor		Phone Number	Monthly Salary \$
Additional Income: (Additional income such as child support, alimony, etc, need not be disclosed unless it is to be included for qualification hereunder) Source:					Monthly Amount \$
Applicant # 2 - Vehicle Information					
Make	Model	Year	Color	License Plate Number	State Issued
Payments Made to:					Monthly Payment \$
Applicant # 2 - Emergency Contact Information					
Emergency Contact		Relationship			Phone Number
Emergency Contact Address		City		State	Zip Code
Personal Reference		Relationship			Phone Number

Other Person to Occupy Rental Property (All persons living the apartment must be listed)		Full Name	Relationship to Applicant	Birthdate	Social Security Number
	1				
	2				
	3				
	4				
	5				

Have you or any family member, co-applicants or other person planning to reside in our community ever been indicted or convicted of any felony or misdemeanor offense?

YES _____ NO _____

HAVE YOU OR ANY FAMILY MEMBER, CO-APPLICANTS OR OTHER PERSON PLANNING TO RESIDE IN OUR COMMUNITY EVER BEEN EVICTED? YES _____ NO _____

Were you referred to Remington Village Green Apartments by anyone? () Yes () No

If 'Yes, Name _____ Apt. # (if applicable) _____

I/We certify that to the best of my/our knowledge, all statements are true and complete. I/We further authorize Remington Village Apartments to obtain credit reports, character reports, verification of rental history, income history and employment history as necessary to verify all information put forth in the above-referenced application for residency. Faults, fraudulent or misleading information may be grounds for denial of residency or subsequent eviction.

In addition, applicant has paid \$_____ holding deposit to agent to hold an apartment available from the date of application to the date of lease initiation. In no event shall this period exceed 30 days. In the event this application is not approved by the owner, or the application withdraws the application within 72 hours of the date of deposit, the \$_____ holding deposit shall be refunded. After that initial 72 hour period expires, it is understood that should the applicant refuse to sign the lease or occupy the premises on the agreed upon date, the holding deposit is thereby forfeited. Upon occupying the premises, the \$_____ holding deposit may be applied to any amounts owing at this time, such as rent due, security deposits , etc.

Signed _____ Dated _____
Applicant # 1

Signed _____ Dated _____
Applicant # 2

Signed _____ Title _____ Dated _____

