

APPLICATION FOR RENTAL

Residential Leasing Office
1035 Sherman Street
Denver, CO 80203
Phone: (303) 830-1005
Fax: (303) 830-2012



PROPERTY
ADDRESS
APARTMENT HOME
RENTAL RATE



PERSONAL INFORMATION: (Application cannot be processed unless all blanks are completed).

Name	Driver's License # and State	Date of Birth	Age
Social Security Number	Telephone Number	Marital Status	Do you have pets?
		How many pets?	Please describe

OTHER OCCUPANTS: (A co-tenant may be acceptable if applicant is unable to qualify independently).

Co-Signer Name (if applicable)	Social Security Number	Date of Birth
Name	Social Security Number	Date of Birth

CURRENT ADDRESS: (2 years of verifiable Landlord references must be listed).

Street Address	Own or Lease?	How long?	Monthly Rent / Mortgage	Dates of Residency (Month & Year)
City, State, Zip Code	Reason for leaving		Name of Owner or Owner's Agent and	Telephone Number

PREVIOUS ADDRESS:

Street Address	Own or Lease?	How long?	Monthly Rent / Mortgage	Dates of Residency (Month & Year)
City, State, Zip Code	Reason for leaving		Name of Owner or Owner's Agent and	Telephone Number
Additional Previous Address Information			Name of Owner or Owner's Agent and	Telephone Number

EMPLOYMENT INFORMATION: (2 years of verifiable employment must be listed, current job or income required).

Present Employer	How Long?	Supervisor's Name	Telephone Number
Street Address	City, State, Zip Code	Position	Salary/Wage per Month
Previous Employer	How Long?	Supervisor's Name	Telephone Number
Street Address	City, State, Zip Code	Position	Salary/Wage per Month
Additional Employment Information		Supervisor's Name	Telephone Number

OTHER INCOME: Verification required.

Source	Amount per Month	Telephone Number to Verify
--------	------------------	----------------------------

BANK REFERENCE:

Bank Name	Branch	Checking Account Number	Savings Account Number
Street/Mailing Address		City, State, Zip Code	Telephone Number

APPLICATION FOR RENTAL

CREDIT REFERENCES:

(Please list a minimum of three accounts)

Creditor	Account Number	Total Debt	Monthly Payments
Creditor	Account Number	Total Debt	Monthly Payments
Creditor	Account Number	Total Debt	Monthly Payments

LOAN REFERENCES:

(Please list all obligations)

Creditor	Street/Mailing Address	City, State, Zip Code	Monthly Payment	Telephone Number
Creditor	Street/Mailing Address	City, State, Zip Code	Monthly Payment	Telephone Number
Creditor	Street/Mailing Address	City, State, Zip Code	Monthly Payment	Telephone Number

AUTO INFORMATION:

Make and Model	Color	Year	State / License Plate #
----------------	-------	------	-------------------------

EMERGENCY INFORMATION:

Emergency Contact Name	Relationship	Telephone Number
Street Address	City, State, Zip Code	

MISCELLANEOUS INFORMATION:

Have you ever been evicted from any tenancy?

Yes	No
Yes	No

Have you ever been charged with or convicted of a felony?

Applicant understands that Triton Properties Inc. ("Triton") will be obtaining a credit report and a criminal background check, among other things, in evaluating this Application, and Applicant hereby authorizes verification of any and all information set forth on this Application, including release of information by any law enforcement authority, investigator, consumer reporting agency, bank or savings and loan, employer (present and former), owner or owner's agent for any home rented or leased, and any lender. Applicant voluntarily and knowingly unconditionally releases Triton and any named or unnamed informant from any and all liability resulting from the conduct of such verification and from furnishing or receiving such information. All such information hereon, and released as authorized above, will be kept confidential. APPLICANT REPRESENTS THAT THE INFORMATION SET FORTH ON THIS APPLICATION IS TRUE AND COMPLETE. Material misrepresentations on this Application will constitute a default under the Lease Agreement between the parties.

APPLICATION FEE: Applicant has submitted the sum of **\$35.00** (if applicant has maintained residency in the state of Colorado for more than six consecutive months) / **\$45.00** (if applicant has not maintained more than six months of residency within the state of Colorado), which is a non-refundable payment for the processing of my Application and to cover the cost of a criminal background check. Such sum is not a rental payment or deposit amount. In the event this Application is approved or disapproved, this sum will be retained by Triton to cover the cost of processing the Application as furnished by the Applicant.

OPTION FEE TO RENT: It is understood that the amount of the Option Fee to Rent **\$200.00** will be applied toward payment of Applicant's security deposit. This amount will be refunded by Triton if Triton does not accept the Applicant as a resident. If the Applicant is accepted, and subsequently the Applicant does not move in, the amount of the Option Fee to Rent shall be retained as compensation for holding the apartment home off the market.

Applicant's Signature _____ Date _____ Team Member Verify I.D. _____

FOR OFFICE USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE

Application Control #	Date Application Received	Amount of \$ Received / Form of Payment	Received By
Application Logged in Control Book By:		Date / Time Application Faxed to Verification Company	

APPLICATION FOR RENTAL

Approval / Denial Date	Approved	Denied	Approval / Denial Letter Sent - Date / By
------------------------	----------	--------	---