## Bell Pointe Apartments Application 8722 Messiah Dr., Newburgh, IN 47630 (812) 490-0404

info@bellpointeapartments.com

## Application must be filled out ENTIRELY and must attach income verification

Primary Applicant Full Name:				
Social Security #:			State:	
Date of Birth:		Contact Phone #:		
Make/Model of Vehicle:		License Plate #:	State:	
Email:				
Current Address:				
How long at present address? _		Why are you moving?		
Landlord Name and Phone #: _				
Job Title: How Long: _		Monthly Gross Income: _		
Secondary Applicant Full Name	e:		·	
Social Security #:		Driver's License #:	State:	
Date of Birth:		Contact Phone #:		
Make/Model of Vehicle:		License Plate #:	State:	
Email:				
Current Address:				
How long at present address? _		Why are you moving?		
Landlord Name and Phone #: _				
Job Title:	_ How Long: _	Monthly Gross Income: _		
Please list Name, Age, and Rela	ationship of any	other occupants: (Anyone over 18 mus	t complete app)	

Pets: If you have pets	, please complete the follo	owing: (2 pets ma	ax per unit; proo	f of current vaccination
records required and	must be up to date before	being on propert	ty)	
Name of Pet:	Breed:	Age:	Color:	Weight:
Name of Pet:	Breed:	Age:	Color:	Weight:
Additional Questions	: Check one:			
Have you ever had an	eviction filed on you?		No Y	'es
Explain:				
Have you broken a lea	ase or been asked to move	out?	No Y	es es
Explain:				
Have you ever been c	onvicted of ANY crime?		No \	'es
Explain:				
Have you ever declare	ed Bankruptcy?		No \	es es
Explain:				
1 2	tional Credit References: (			
3				
correct. I authorize a credit report or any o eligibility. I agree to part of my application discovered after movilease until I have paid NOT refundable if I ca	olicant, certify that the ansind consent to the release of their report necessary to very the \$30/applicant fee for has been falsified, it shalling into a property. I unde a deposit to hold the aparticel my application, or it is displayed and application.	of any information of any information of the background be grounds for destand that an aput ment for my most discovered that	n the landlord m of my application d check(s). I und enial of residence artment will con ove in. I understa I falsified my ap	ay need to obtain a on or to determine my derstand that if any y, or future eviction if tinue to be offered for nd that my deposit is
Primary Applicant Sig	nature:			_ Date:
Secondary Applicant 9	Signature:			Date: