

**PARK MANOR APARTMENTS**  
2710 N.W. 63rd Street, Oklahoma City, Oklahoma 73116 Phone: 405-842-1766 Fax: 405-842-4808

**RENTAL APPLICATION**

**Personal Information**

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Name: \_\_\_\_\_ SS #: \_\_\_\_\_ D/L #: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Landlord: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_  
Previous Address:  
(if above address is 12 months or less) \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Personal Reference: \_\_\_\_\_ Phone: \_\_\_\_\_  
Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
Roommate/Spouse: \_\_\_\_\_ SS #: \_\_\_\_\_ D/L #: \_\_\_\_\_  
Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Current Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Landlord: \_\_\_\_\_ Landlord Phone: \_\_\_\_\_  
Previous Address:  
(if above address is 12 months or less) \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Employment Information**

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Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Hire Date: \_\_\_\_\_ Salary (month): \_\_\_\_\_  
Previous Employer (if less than 12 months): \_\_\_\_\_  
Phone: \_\_\_\_\_ Hire Date: \_\_\_\_\_ Salary (month): \_\_\_\_\_  
Roommate/Spouse  
Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Hire Date: \_\_\_\_\_ Salary (month): \_\_\_\_\_  
Previous Employer (if less than 12 months): \_\_\_\_\_  
Phone: \_\_\_\_\_ Hire Date: \_\_\_\_\_ Salary (month): \_\_\_\_\_

**Other Information**

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Other persons to occupy apartment:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Automobiles:

Make & Year: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_  
Make & Year: \_\_\_\_\_ License: \_\_\_\_\_ State: \_\_\_\_\_

Pets: None Dog Cat Other (specify): \_\_\_\_\_ Weight & Breed: \_\_\_\_\_

Do you smoke? Yes No

It is understood that the above information is confidential. The undersigned applicant(s) hereby certify that the above information is true and accurate and authorize verification of same and authorize a credit check. **Please include \$30.00 application fee per person, \$45.00 for married couple.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Roommate/Spouse: \_\_\_\_\_ Date: \_\_\_\_\_