A&G Property Management

www.agpropertymanagement.com 800 Custer Avenue | Suite 2 | Evanston, IL 60202 Tel. 847-424-0044 Email office@brauninvest.com Fax 844-741-2269

RESIDENTIAL LEASE APPLICATION

Each applicant and guarantor (if applicable) must fill out a separate application.

Application Date: _		Address Applie	d For:		
Monthly Rent: _		Lease Term:		Security Dep	oosit:
		Applicant I	nformation		
Name:		Middle		Last	
	_ -			Work #:	
Date of Birth:	// Driver's	s License #:		State:	
Email Address:					
		Current	Address		
Address:		City/S	State:		Zip Code:
Lease Start Date:	I	Lease End Date:		Monthly Rent: _	
Landlord Name:		Landlord Pho	one/Fax:		
Landlord Email:		Reas	on for Leaving: _		
		Previous	Address		
Address:		City/S	State:		Zip Code:
Lease Start Date:	I	Lease End Date:		Monthly Rent: _	
Landlord Name:		Landlord Pho	one/Fax:		
Landlord Email:		Reaso	on for Leaving: _		
		Employment	Information		
Employer:			Start Date:		
Occupation:			Annual Salary:		
Employer Address:	Address		City	State	Zip Code
CN.			•		•
Supervisor Email: _			Supervisor Far	x:	
		Emergenc	y Contact		
Name	Relationship	Addres	SS	City/State/Zip	Phone

List Names of ALL additional occupants:	Other Occupants
Do you have any Pets?	How did you hear about our company?
1) A NON-REFUNDABLE CREDIT CHE FORM OF A MONEY ORDER, CASH	CATION, APPLICANT(S) MUST COMPLY WITH THE FOLLOWING: CCK AND PROCESSING FEE OF \$50.00 PER ADULT MUST BE PAID IN THE CIER'S CHECK OR CREDIT CARD M OF A MONEY ORDER, CASHIER'S CHECK OR CREDIT CARD MUST BE
FORWARDED TO HOLD THE APAR APPLIED TOWARD THE BALANCE ACCEPTED FOR THIS PAYMENT. A TWO BUSINESS DAYS PROVIDED TAPPROVAL OF THIS APPLICATION LEASING PROCEDURE AND THE \$2	TIMENT DURING THE APPROVAL PROCESS. THIS PAYMENT WILL BE OF YOUR SECURITY DEPOSIT. NO PERSONAL CHECKS WILL BE AN ATTEMPT WILL BE MADE TO COMPLETE THIS APPLICATION WITHIN THAT EMPLOYMENT AND PAST TENENCIES CAN BE VERIFIED. UPON IN THE APPLICANT WILL BE EXPECTED TO IMMEDIATELY COMPLETE THE 250 HOLDING FEE WILL BE APPLIED TOWARDS THE SECURITY DEPOSIT. ANT DECLINES TO EXECUTE (SIGN) A LEASE, THE \$250 HOLDING FEE
ALL MONEY ORDERS OR CASHIERS C □ AG CUSTER LLC	HECK PAYMENTS SHOULD BE MADE OUT TO: □RAVENSWOOD GROUP LLC
□ 614 CLARK STREET LLC	□ GDB 2012 LLC
□ FORTE REAL ESTATE LLC	□ BRAUN HOLDINGS LLC
□ EVANSTON PROPERTIES LLC	□ 1123 WEST MONTANA PROPERTIES LLC
THE \$250.00 HOLDING FEE IS REFU MANAGEMENT.	INDED ON ALL APPLICATIONS DECLINED BY A & G PROPERTY
3) READ THE FOLLOWING PARAGRA	APHS SIGN AND DATE WHERE INDICATED.
become part of the lease of the pren I authorize you to make an investig landlords, employers or others who	•
-	or the apartment that I will receive a full refund of my deposit. However, the payment
receive a verbal notification from A written notification will be noted an MONEY ORDER OR CASHIER'S mentioned apartment within two w	d apartment, I understand that I will be notified in writing of my acceptance and/or & G Property Management. I also understand that the date of this verbal and/or and that I promise to forward the balance of the security deposit IN THE FORM OF A CHECK, a post-dated check for the first month's rent and sign the lease for the above orking days from the date that I am verbally notified that my application was
apartment, is forfeited to A & G Pr	nt after I have been notified of acceptance, I understand that my deposit, to hold the coperty Mgt. If I do not sign the lease within two working days, I realize the apartment er applicant and that my deposit will not be refunded.
Any exceptions to the a	bove procedures must be approved by A & G Property Management.
Signature of Applicant	Date

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RESIDENTIAL LEASE APPLICATION

TENANCY VERIFICATION

Applicant: Please complete only the top portion and return to our office.

Name:	
Address of Unit Applied for:	
	he following information to A&G Property Management. I would s soon as possible in order the complete my application for an
Applicants Signature	Date
Applicant's Current Address:	
Landlord's Name:	
Landlord Phone:	Fax/Email
Any damage to the premises: Was the apartment shared? YES or NO I Were there any complaints filed against the If this tenant was to reapply with your com or NO Additional	Number of NSF Checks:
Completed by :	
Title:	Date:

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RESIDENTIAL LEASE APPLICATION

EMPLOYMENT VERIFICATION

Applicant: Please complete only the top portion and return to our office.

Name:			
I hereby authorize my employer A&G Property Management. I would complete my application for an apartm	to release the following information greatly appreciate the return of this form as soon as possible in ordernt. Thank you.	to r the	
Applicants Signature	Date		
Applicant's Current Address:			
Employer's Name:	Contact Person		
Phone:	Fax/Email		
Information below to be completed by	y EMPLOYER ONLY (not applicant):		
Supervisor's Name:			
Applicants Date of Employment:	Title:		
Yearly Salary:			
Additional Information			
Form Completed by:			
Print Name	Signature		
Title:	Date [.]		