



# RENTAL APPLICATION – 6530 E 5<sup>TH</sup> PL

Each occupant over the age of 18 **must** fill out a separate application.  
 Fill out completely. Incomplete or partial applications **will not** be processed.

**AVAILABLE MARCH 15, 2024**

FOR LEASE – House @ 6530 E 5<sup>th</sup> Pl

1 Year Minimum Lease – \$850.00/month with \$850.00 Deposit

\$250.00 Non-refundable Deposit per approved pet

No inside pets weighing over 20lbs – 2 pets maximum. No Smoking in house.

**Amenities Include:**

- ✓ 2 Bedrooms/1 Baths, approx. 728 sq ft
- ✓ Living Room with built in shelves
- ✓ Kitchen includes Refrigerator, Gas Oven, & Dishwasher
- ✓ Alarm System
- ✓ Refinished Hardwoods
- ✓ W&D Hookups in Garage
- ✓ Central Heat & Air
- ✓ Large Fenced Yard with shed
- ✓ 1 Car Attached Garage

Visit [www.aceairinc.com](http://www.aceairinc.com) for inside pictures – WE DO NOT ACCEPT SECTION 8

Questions? Call (918) 227-0653 *between 8am & 5pm Monday-Friday only*

***Calls outside of our normal business hours will be returned the following business day.***

**Return completed applications to 705 N 9<sup>th</sup> St, Sapulpa, email to [rentals@aceairinc.com](mailto:rentals@aceairinc.com), or fax to 918-227-2948**

PERSONAL INFORMATION			
First Name	Middle	Last	SSN #
List any previous Last Names (Maiden or Prior Marriage) or Alias' Known By:			
DOB	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		DL # State
Phone <input type="checkbox"/> Cell <input type="checkbox"/> Home	Alt Phone <input type="checkbox"/> Home <input type="checkbox"/> Work	Email	
Present Home Address		City/State/Zip	
Dates at Residence	Landlord's Name	Landlord's Phone Number	
Reason For Leaving	Amount of rent	Is present rent up to date? <input type="checkbox"/> Yes <input type="checkbox"/> No #__ months past due	
Previous Home Address		City/State/Zip	
Dates at Residence	Landlord's Name	Landlord's Phone Number	
Reason For Leaving	Amount of rent	Was rent paid on time? <input type="checkbox"/> Yes <input type="checkbox"/> No #__ months past due	
Previous Home Address		City/State/Zip	
Dates at Residence	Landlord's Name	Landlord's Phone Number	
Reason For Leaving	Amount of rent	Was rent paid on time? <input type="checkbox"/> Yes <input type="checkbox"/> No #__ months past due	
EMPLOYMENT INFORMATION			
Current Employer	Position		Hours per week
Supervisor Name	Phone Number		Dates Employed
Address	City/State/Zip		Work Number ID & Salary Key



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EMPLOYMENT INFORMATION CONTINUED					
Previous Employer		Position		Hours per week	
Supervisor Name		Phone Number		Dates Employed	
Address		City/State/Zip		Work Number ID & Salary Key	
INCOME INFORMATION					
Current Income \$ _____ per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year		Source		Proof Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Current Income \$ _____ per <input type="checkbox"/> Week <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Month <input type="checkbox"/> Year		Source		Proof Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	
CREDIT / FINANCIAL INFORMATION (INCLUDE OPEN CREDIT CARDS, LOANS, LIENS, ETC)					
Name of Bank	Account Type	Account in good standing?	Contact Number		
Name of Bank	Account Type	Account in good standing?	Contact Number		
Creditor's Name	Account Balance	Monthly Payment	Creditor's Phone Number		
Creditor's Name	Account Balance	Monthly Payment	Creditor's Phone Number		
OTHER PROPOSED OCCUPANT(S) NOT INCLUDING SELF					
Full Name		Relationship	Occupation	Age	
Full Name		Relationship	Occupation	Age	
Full Name		Relationship	Occupation	Age	
PROPOSED PET(S)					
Name	Breed & Colors		Indoor or Outdoor	Age	
Name	Breed & Colors		Indoor or Outdoor	Age	
VEHICLE INFORMATION					
Year	Make	Model	Color	Tag #	State
EMERGENCY CONTACTS					
Name		Phone <input type="checkbox"/> Cell <input type="checkbox"/> Home		Alt Phone <input type="checkbox"/> Work <input type="checkbox"/> Home	
Relationship		Address		City/State/Zip	
Name		Phone <input type="checkbox"/> Cell <input type="checkbox"/> Home		Alt Phone <input type="checkbox"/> Work <input type="checkbox"/> Home	
Relationship		Address		City/State/Zip	
TENANCY QUESTIONS					
Have you ever been sued for bills? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever been bankrupt? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever broken a lease? <input type="checkbox"/> Yes <input type="checkbox"/> No			Have you ever been evicted? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No			Misdemeanor? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Explain any "Yes" answers on the above questions with names and details on the back of this application or a separate sheet of paper.					



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## Applicant Authorization

Applicant represents that all the above statements are true and correct and hereby authorizes Ace Air, Inc. to verify the above items including, but not limited to, contacting past and present landlords, employers, creditors, credit bureaus, and any other sources deemed necessary to investigate the applicant. By signing below, Applicant hereby represents all information on this application is true, complete, and hereby authorizes annual verification of information, references, and credit history for continual rental consideration or for collection purposes should that be necessary.

Applicant acknowledges this application will become part of the lease agreement if or when approved. If any information is found to be incorrect, the application will be rejected and any subsequent rental agreement becomes void. False and/or misleading statements will be sufficient reason for immediate eviction.

ANY PERSON OR FIRM IS AUTHORIZED TO RELEASE INFORMATION ABOUT THE UNDERSIGNED UPON PRESENTATION OF THIS FORM OR A PHOTOCOPY OF THIS FORM AT ANY TIME.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name