

HOJ Management LLC
(520) 329-2599 - Office@hojmanagement.com
Mailing Address: P.O. Box 90712, Tucson, AZ 85752

Address of desired property: _____ Date: _____

To guarantee compliance with the Federal Fair Housing Acts, information is required for each applicant over the age of eighteen (excluding dependent children) who will reside at the property.

PLEASE PRINT

Applicant's Full Name: _____ **Social Security #:** _____

Date of Birth: _____ Driver's License #: _____ State: _____

Home Phone #: _____ Work Phone #: _____ Email: _____

Employer: _____ Phone #: _____

Address: _____ City: _____

Hire Date: _____ Position: _____

Gross monthly pay: \$ _____ Hours per week: _____ Supervisor: _____

Co-Applicant's Full Name: _____ **Social Security #:** _____

Date of Birth: _____ Driver's License #: _____ State: _____

Home Phone #: _____ Work Phone #: _____ Email: _____

Employer: _____ Phone #: _____

Address: _____ City: _____

Hire Date: _____ Position: _____

Gross monthly pay: \$ _____ Hours per week: _____ Supervisor: _____

ADDRESS HISTORY

Current Address: _____ **City:** _____ **State:** _____

Move-in date: _____ Move-out Date: _____ Rent \$: _____

Why Moving? _____

Landlord: _____ Phone #: _____

Previous Address: _____ **City:** _____ **State:** _____

Move-in date: _____ Move-out Date: _____ Rent \$: _____

Why Moved? _____

Landlord: _____ Phone #: _____

Mail to POB 90712, Tucson, AZ 85752 -or- Text clear photos of application to (520) 329-2599
-or- Send a scan or photos of the application to Office@hojmanagement.com

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OTHER INCOME YOU WOULD LIKE US TO CONSIDER

(For example: Spousal support, child support, disability, social security, self employment, etc...)

1. Source: _____ Gross amount per month: \$ _____
2. Source: _____ Gross amount per month: \$ _____

LIST TWO (2) PERSONAL REFERENCES TO CONTACT IN CASE OF EMERGENCY

Name: _____ Relationships: _____
Address: _____ Phone: _____
Name: _____ Relationships: _____
Address: _____ Phone: _____

LIST ALL VEHICLES OWNED

Year	Make (ie. Ford/Chevy)	Model	State / License #

**ANSWER YES OR NO TO THE FOLLOWING QUESTIONS:
(These questions apply to both Applicant & Co-Applicant.)**

1. Are you prepared to take on the burden of home ownership, including maintenance and repairs? _____
2. Are you prepared to make the monthly payments in full every month on the 1st of the month? _____
3. Will you have the entire down payment available prior to moving in? _____
4. Have you ever been evicted from a property? _____
5. Have you filed bankruptcy in the last 7 years? _____
6. Have you ever been foreclosed upon in the last 7 years? _____

LIST ALL NAMES AND AGES OF THE INDIVIDUALS THAT WILL RESIDE IN THE PROPERTY

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____
7. _____	8. _____

VERY IMPORTANT: When submitting this application, you must attach proof of income for each applicant: pay stubs showing current and year-to-date totals; SSI or disability award letters; if self-employed, deposits and 2 months bank statements. Applications submitted without verification of income will not be processed.

Applicant agrees that all credit information maintained by HOJ Management LLC may be given to any credit reporting agency. Applicant certifies that all information provided in this application is true. Applicant understands that any false answers or statements made will be sufficient grounds for eviction/forfeiture. Applicant authorizes present and past landlords, employers, banks, credit references, personal references, and any other person to release information regarding applicant's credit, rental and employment history.

Please be sure the application is filled out completely. This will ensure a timely and accurate response.

Applicant Signature _____	Co-Applicant Signature _____
Date _____	Date _____

NOTE: APPLICATIONS WILL NOT BE ACCEPTED ON A "FIRST-COME, FIRST-SERVED" BASIS. THIS PROPERTY IS MANAGED BY A PRINCIPAL REPRESENTING HIS INTEREST AND/OR THAT OF THE OWNER OF THE REAL PROPERTY. HOJ MANAGEMENT LLC WILL ASSIST ALL PERSONS WITHOUT REGARD TO RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, FAMILIAL STATUS, MARITAL STATUS, DISABILITY, OR ANY OTHER STATUS PROTECTED BY FEDERAL, STATE, OR LOCAL LAW.

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