

# Turnagain Crossing Apartments

2802 Turnagain Street – Anchorage, AK

[www.turnagaincrossing.com](http://www.turnagaincrossing.com)

907-830-3330

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## Leasing Application

*Thank you for your interest in leasing an apartment at Turnagain Crossing. Please complete all of the requested information on this form for each person that will be residing in the apartment.*

Address of Unit Wanted: 2802 Turnagain Street, Anchorage, AK (unit to be determined upon completion of construction and MOA issuance of Certificate of Occupancy).

Desired Date of Occupancy: \_\_\_\_\_

Application Fee: \$30 per applicant Rental Rate: \$1,500/month plus gas and electric

Security Deposit: \$1,500 Pet Deposit: N/A Tenant Paid Utilities: Gas \_\_\_ Electric \_\_\_

Copy of Photo ID Attached: \_\_\_\_\_

## PERSONAL INFORMATION

APPLICANTS FULL NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ APPLICANT CELL # \_\_\_\_\_

Hm Ph. #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

CO-APPLICANTS FULL NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

SOCIAL SECURITY #: \_\_\_\_\_ APPLICANT CELL # \_\_\_\_\_

Hm Ph. #: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

CURRENTLY WE DO NOT ACCEPT PETS OR SMOKERS

## RESIDENT HISTORY

PRESENT ADDRESS: \_\_\_\_\_ ZIP Code \_\_\_\_\_

Present Telephone: \_\_\_\_\_ Cell No. \_\_\_\_\_

Length of time at present address: \_\_\_\_\_ Present Landlord: \_\_\_\_\_

Phone No. \_\_\_\_\_ Amount of Rent: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

Co-Resident's Current Address (if different than above): \_\_\_\_\_

Previous Address: \_\_\_\_\_

Previous Landlord: \_\_\_\_\_ Phone #: \_\_\_\_\_

Length of time at previous address: \_\_\_\_\_ Present Landlord: \_\_\_\_\_

Phone No. \_\_\_\_\_ Amount of Rent: \_\_\_\_\_

Reason for Moving: \_\_\_\_\_

### EMPLOYMENT INFORMATION

EMPLOYED BY \_\_\_\_\_ How Long? \_\_\_\_\_  
Employer's Address \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_  
Position Held \_\_\_\_\_ Monthly Salary \_\_\_\_\_  
Supervisor \_\_\_\_\_

CO-RESIDENT OR PREVIOUS EMPLOYER \_\_\_\_\_ How Long \_\_\_\_\_  
Employer's Address \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_  
Position Held \_\_\_\_\_ Monthly Salary \_\_\_\_\_  
Supervisor \_\_\_\_\_

### CREDIT REFERENCES

Bank: \_\_\_\_\_ 2<sup>nd</sup> Bank: \_\_\_\_\_  
Checking Acct #: \_\_\_\_\_ Savings Acct No. \_\_\_\_\_  
2<sup>nd</sup> Acct #: \_\_\_\_\_

Personal References (not related to applicant):  
Address: Phone#:

Complete the following only for those accounts that do not appear on credit reports (ie, private loans, Rent to Own or Rentronics):

Credit Reference: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Have you ever been convicted of a felony? \_\_\_\_\_ Date: \_\_\_\_\_  
Explain circumstances \_\_\_\_\_

### OTHER INFORMATION

Number of Automobiles (Including Company Cars) \_\_\_\_\_ Driver's License No. \_\_\_\_\_  
Make \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Tag No. \_\_\_\_\_ State \_\_\_\_\_  
Make \_\_\_\_\_ Year \_\_\_\_\_ Color \_\_\_\_\_ Tag No. \_\_\_\_\_ State \_\_\_\_\_

Household Income \$ \_\_\_\_\_ Per \_\_\_\_\_  
Other Remarks: \_\_\_\_\_

In case of personal emergency, Notify (next of kin): \_\_\_\_\_  
Relationship \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Co-Resident next of kin \_\_\_\_\_  
Relationship \_\_\_\_\_ Phone No. \_\_\_\_\_  
Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

HAVE YOU OR CO-APPLICANT EVER: Been sued for non-payment of rent? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Been Evicted or asked to move out? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Broken a rental agreement or lease? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Been sued for damage to rental property? Yes \_\_\_\_\_ No \_\_\_\_\_

I hereby make application for a unit and certify that is information is correct. I authorize you to contact any reference that I have listed and authorize those references listed to release information to Turnagain Crossing LLC. Applicant signature authorizes Turnagain Crossing LLC to complete a full credit check of their own on the applicant(s).

\_\_\_\_\_  
 Applicant's Signature                      Date    Co-Applicant's Signature                      Date

FOR OFFICE USE ONLY – DO NOT WRITE BELOW

Date Application Received \_\_\_\_\_ Received By \_\_\_\_\_

	Reference Verification	Remarks
	Present Landlord	
	Previous Landlord	
	Employment	
	Co-Res Employment	
	Bank Reference	
	Credit Reference	
	Credit Report	

Record of Advance Deposits Received

Date	Description	Amount	How Paid

This application: Approved                      Not Approved

By:  
 Assigned Unit No.

Move-in Date